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 Web: www.simply-salema.co.uk

BOOKING FORM

Please complete this form in full (including all fields marked in a red border) and return to Simply Salema by email or post together with appropriate payment.

NAME OF ACCOMMODATION

PARTY LEADER Title Name

Address (inc. Post/Zip code)

Tel. Home Mobile Work

Email Total no. in party Total no. self drive Total no. by air

Total no. requiring transfer Total no. catered Total no. self catered

GROUP DETAILS Arrival Date (dd/mm/yy) Departure Date (dd/mm/yy)

	Title	First name	Surname	Address (if known)	Age on arrival if under 18 or over 65
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

PAYMENTS: I am making payment to cover: Please specify £ or €

DEPOSITS: Self Catered - 25% of accommodation cost

Catered - £120 or 150€ per person x.....

TOTAL: (Payment by bank transfer or cheque payable to 'Simply Salema')

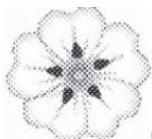
DECLARATION:

I have read, understood and agree to Simply Salema's Booking Terms and Conditions. I am authorised to make the booking on the basis of these booking conditions by all members of my party as listed above, by any further members of my party I may subsequently include on this booking and by the parent or guardian of all party members who are under 18 when the booking is made.

I confirm that I and all members of my party have suitable and adequate insurance, including cover for any activities I/they will be partaking in, and shall fully indemnify Simply Salema for any expenses, costs or losses incurred as a result of any failure to do so.

I confirm that to the best of my knowledge all information listed on this booking form is correct and agree to make all payments by the due date(s).

PRINT NAME **Date (dd/mm/yy)**



LUXURY ALGARVE BEACH/OCEAN VILLAS

