Glen Orchard
HOLIDAY PARK

Tel: 01425 616463 • Fax: 01425 638655
Email: bookings@glenorchard.co.uk
Website: www.glenorchard.co.uk
VAT No. 889539347

BOOKING FORM

BEFORE FILLING IN BOOKING FORM PLEASE CHECK AVAILABILITY BY PHONE
PLEASE RESERVE THE FOLLOWING HOLIDAY CARAVAN

HARDLEY	6 Berth	3 Bedroom	☐
EXBURY	6 Berth	3 Bedroom	☐
ROMSEY 1	4 Berth	2 Bedroom	☐
ROMSEY 2	4 Berth	2 Bedroom	☐
RICHMOND	4 Berth	2 Bedroom	☐
HOLBURY	4 Berth	2 Bedroom	☐
SETLEY	3 Berth	2 Bedroom	☐
BEAULIEU	4 Berth	2 Bedroom	☐
BECKLEY	2 Berth	1 Bedroom	☐

NO. OF VANS REQUIRED .....
DATES FROM ..... TO .....
HOLIDAY COSTS .....
LINEN HIRE .....
COT HIRE.....
TOTAL COST .....
DEPOSIT 1/3 OF COST.....
BALANCE REMAINING.....

PLEASE COMPLETE DETAILS FOR ALL MEMBERS OF YOUR PARTY

NAME	AGE (if under 18)	ADDRESS
.....	.....	.....
.....	.....	.....
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.....	.....	.....
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DEPOSIT: One third of total hire charge. Provisional booking by telephone will be accepted, but a deposit must be received within 7 days or provisional booking will be cancelled.
Less than 21 days remaining then full payment should be forwarded.
PLEASE MAKE CHEQUES PAYABLE TO GLEN ORCHARD HOLIDAY PARK.

Where did you hear about Glen Orchard? .....

I enclose payment of ..... and agree to pay the balance at least 21 days before the commencement of my holiday.
I agree to abide by your terms and conditions of booking which I have read.

BOOKING FORM TO BE SIGNED BY PERSON MAKING THE RESERVATION

NAME .....

ADDRESS .....

..... POST CODE .....

SIGNED ..... DATE ..... TEL NO ..... CAR REG .....

PLEASE INDICATE WHICH CREDIT/DEBIT CARD YOU WISH TO USE FOR PAYMENT AND COMPLETE THE DETAILS. PLEASE MAKE SURE YOU HAVE SIGNED AND DATED THE FORM.

Visa ☐ Mastercard ☐ Delta ☐ Switch ☐ Issue No ☐☐ Security No

Card No ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry Date ☐☐ ■■ ☐☐ ☐☐☐

Title ☐☐☐☐ Initials ☐☐☐ Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

SIGNATURE ..... DATE .....