

QUINTESSENTIAL TRAVEL LTD **BOOKING FORM**



Please complete and return to: Sales & Marketing Dept, 3 Daynes Way, Burgess Hill, Sussex, RH15 9RH.

TRAVELLER INFORMATION:

Your Name & Address to which all correspondence will be sent

NAME:		DEPARTURE DATE:
ADDRESS:		HOLIDAY DETAILS:
POST CODE:		TOUR CODE:
TELEPHONE NO:	EMAIL ADDRESS:	

DETAILS OF PERSONS TRAVELLING

TITLE	FORENAME	SURNAME	PASSPORT NO	EXPIRY	NATIONALITY	DATE OF BIRTH
1						
2						
3						
4						

Single trip travel insurance (as per our policy) will be automatically added to your invoice UNLESS you complete the details of your insurance below.

INSURANCE COMPANY.....

POLICY NUMBER..... EXPIRY DATE.....

INSURANCE COMPANY EMERGENCY TELEPHONE NUMBER.....

ACCOMMODATION REQUESTED : TWIN/DOUBLE..... SINGLE.....

SPECIAL REQUESTS:
 Cannot be guaranteed and subject to availability.

BOOKING PAYMENT ENCLOSED (if booking is made within 60 days of departure full payment is required)

DEPOSIT £150.00 per person X £..... cheques payable to:
 INSURANCE PREMIUM X £..... Quintessential Travel Ltd
 TOTAL ENCLOSED: £.....

I/we confirm that I am authorised to make this booking and accept the booking conditions.

SIGNATURE:..... DATE:.....

Please charge my credit card/debit card: CARD NUMBER.....
 A handling fee of 2.5% will be charged on any balance payments by credit card. VALID FROM:..... EXPIRY.....
 NAME ON CARD:..... ISSUE NO:..... SECURITY NO.....
 No charge for debit cards.

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