

Return this form to: Sales & Marketing Dept,3 Daynes Way,Burgess Hill,W.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 NUMBER	EXPIRY	DATE OF BIRTH
1					
2					
3					
4					

SPECIAL REQUESTS (Cannot be guaranteed and subject to availability)

ACCOMMODATION:	X SINGLE ROOM X TWIN ROOM	MEAL REQUESTS (ie. Vegetarian etc.)
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In accordance with our booking conditions all persons travelling MUST hold current worldwide travel insurance. Please detail below FULL details of your cover.

Insurance Company:	Policy No
Insurance Company Emergency Contact Number:	Expiry:

In case of Emergency please advise contact Name/Telephone number etc.

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

**DEPOSIT:** £200.00 per person. **please make cheques payable to: QUINTESSENTIAL TRAVEL LTD.**

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

Payment can also be made by Bank Transfer to our account: Bank: HSBC. Sort code: 40-15-16, Account No:31453092

Signature:	Date:
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OR  
Please charge by Credit/Debit Card:



**Please note: Credit/Debit cards are accepted for payment of Deposit ONLY.**

Number:	Valid From:	Valid to:
Name as shown on the card:	Issue No:	Security No.



Confirmation Signature	Date:	<i>Please Note: A handling fee of 2.5% will be applied to all credit card transactions. No charges applied for Debit cards.</i>
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