booking form 2010

ABTA ABTA No. V1801 **Harry Shaw**

Reference number as quoted	Destination/Resort		Departure Point
Holiday number	Departure Date	Number of nights	Hotel Name/ Apartment / Camp Site

Accommodation Requirements*:

HOTELS - Please indicate number of rooms required where applicable

Single | Twin | Double | Treble | Four-bedded | Full Board | All Inclusive | Half Board | Cot

SELF CATERING - Please indicate number of units required at Camping Solmar or Toyca Apartments at Calella

Classic Mobile Homes | Lodges | Cottage | Toyca Apartments

***Whilst every effort will be made to provide your preference, we are unable to guarantee that in all cases it can be provided**

Special requests (please note these cannot be guaranteed)

Mr/Mrs/Miss or Status	First Name	Surname	Nationality	Age if under 18 or over 60	Address *For each child qualifying for a free place, please add in passport number*	Telephone Number

How to Book

Once you have selected the City Cruiser holiday that you would like, telephone our reservation staff to check availability. You should then complete the booking form immediately and forward it to us together with deposit and insurance premium.

City Cruiser Holidays Ltd., Mill House, Mill Lane,Binley, Coventry, CV3 2DU

Reservations: (024) 7645 5544
We are open:
Monday to Friday 09.00-17.30 hrs
Saturday 09.00-16.30 hrs

I undertake that the balance of monies due in full settlement will be paid by me no later than the date shown on my invoice. I certify, on behalf of the person(s) named on this booking form, by whom I warrant I am authorised to make this booking, that I/we have read and agree to the City Cruiser Fair Trading Policy and Holiday Information set out in the brochure relevant to my/our holiday, and the conditions of insurance referred to in that brochure, where applicable. I am over 18 years of age.

Signature _____

Date _____

If above is under 18 years of age signature of Parent/ Guardian. I accept total responsibility for my child's safety.
Signature _____

Contact telephone No. _____

Please state here, in block capitals, name and address of person to whom all correspondence should be sent:

Name _____

Address _____

_____

_____

Tel: _____ Mobile: _____

Payment Details

You can pay direct over the phone using your Switch or Delta card. No charge is made for payment by cheque or debit card. You may also pay with the following credit cards: Mastercard and Visa. Due to the fee levied by credit card companies, a 2.5% charge will be made on each payment. Charge cards such as American Express and Diners Club are not accepted.

Method of payment: *(Please tick)* Cheque | Credit Card* | Other

If paying by Credit Card, please complete the following section:

I authorise you to debit from my Credit Card the following amount £

***CREDIT CARD NUMBER (*MASTERCARD/VISA/SWITCH ONLY)**

EXPIRY DATE

On the reverse of your card, above the signature, is a 7 digit security number. In order to authorise your card transaction, we require the last 3 digits:

ISSUE NO. VALID FROM

CHEQUES MADE PAYABLE TO CITY CRUISER HOLIDAYS LIMITED

Please Note: Personal cheques cannot be accepted if booking/paying within 10 working days of departure.

Deposit - The deposit payable is £45 per person for all holidays. No deposit is payable for infants under 2 years of age on the day of departure or for children qualifying for a free holiday.

I enclose _____ deposits of £45 per person £_____

I enclose _____ full payments (if booking within 4 weeks of departure) £ _____

I enclose _____ insurance at £ _____ per adult*

I enclose _____ insurance at £ _____ per child* *See page 53 for insurance premiums*

I enclose _____ family insurance at £_____ **TOTAL ENCLOSED £** _____

Excess Waiver Premium: I enclose _____ at £6.50 per person

If you do not require our insurance, you must complete the following:
My insurers, providing comparable or greater cover than City Cruiser Holiday Insurance, under all sections and including 24hr emergency assistance are: _____

Insurance Emergency Telephone Number: _____