



# Holiday Booking Form

Please send your completed form and payment to:

Swift Valley Coaches 29 Market Street, Lutterworth, Leicestershire. LE17 4EJ

enquiries@swiftvalleycoaches.com

|                     |                        |
|---------------------|------------------------|
| <b>TOUR TITLE :</b> | <b>DEPARTURE DATE:</b> |
|---------------------|------------------------|

## LEAD PASSENGER DETAILS (all documents to be sent to this address)

|                   |                   |
|-------------------|-------------------|
| <b>Name:</b>      |                   |
| <b>Address:</b>   |                   |
|                   | <b>Post Code:</b> |
| <b>Telephone:</b> | <b>Mobile No:</b> |
| <b>Email:</b>     |                   |

| Title | First Name<br>(Lead passenger first) | Surname | Date of Birth | Room Type          | Pick Up Point | Memberships   | Special Requests/Dietary Requirements |
|-------|--------------------------------------|---------|---------------|--------------------|---------------|---------------|---------------------------------------|
|       |                                      |         |               | Single/Double/Twin |               | NT/ EH / RHS  |                                       |
|       |                                      |         |               | Single/Double/Twin |               | NT/ EH /RHS   |                                       |
|       |                                      |         |               | Single/Double/Twin |               | NT / EH /RHS  |                                       |
|       |                                      |         |               | Single/Double/Twin |               | NT / EH / RHS |                                       |

| Next of Kin Details     |
|-------------------------|
| <b>Name</b>             |
| <b>Relationship</b>     |
| <b>Telephone Number</b> |

| Insurance Disclaimer  |
|---|
| Swift Valley Coaches do not offer holiday insurance. By signing this form you agree to provide your own insurance cover and therefore agree to indemnify Swift Valley Coaches of any expense whatsoever incurred by any passenger named, not having adequate protection at the time of booking. |

| Holiday Insurance Details |
|---------------------------|
| <b>Insurance Company</b>  |
| <b>Policy Number</b>      |
| <b>Telephone Number</b>   |

| Payment  |
|--|
| <b>Please see your holiday invoice for details of deposit and balance payments.</b>  |
| BACS payments: Swift Valley Coaches Sort Code: 60-13-30<br>Account: 65885643 Ref: Your Invoice Number. All major credit cards accepted, call 01455 552414 to make payment. |

| Client Declaration  |
|---|
| I warrant that I am authorised to make this booking and that I have read, understand and accept for myself and all others named above, the Terms & Conditions and other information set out in the holiday brochure. I am 18 years old or over. |
| Signed .....Date ...../...../.....  |