



# BOOKING FORM

## CARAVANS / COTTAGE / CAMPING / TOURING



### 1. YOUR NAME AND ADDRESS (Party Leader)

Mr/Mrs/Miss	INITIALS	SURNAME
ADDRESS		
POSTCODE		
PHONE No.		
E-MAIL ADDRESS		

### 2. YOUR HOLIDAY DATES from 3.45pm arrival date to 9.30 am departure date

Arrival Date	Departure Date	Nights

### 3. YOUR HOLIDAY PARTY

Please print the name of each member of your party and tick their age group

Mr/Mrs/Miss	INITIALS	SURNAME	A G E S		
			-3	3-15	16+
1.		Self			
2.					
3.					
4.					
5.					
6.					
7.					
8.					

### 4. YOUR HOLIDAY ACCOMMODATION

TYPE	No. of bedrooms	

### 5. ADDITIONAL CHARGES

	TICK IF REQUIRED	
LINEN FOR.....BEDS		
COT / HIGHCHAIR / BOTH		
MICROWAVE		
DOG		

### 6. SPECIAL REQUESTS


### FOR OFFICE USE ONLY


### 7. YOUR TENT OR TOURER PITCH

Please enter number of pitches required			
Touring caravan		Trailer tent	
Tent		Tent size	

### 8. TENTS / TOURERS

UNIT TARIFF	NUMBER OF PITCHES	NIGHTS	

### 9. ADDITIONS (Pitches)

	ADULTS 16 YRS +	CHILD 3 - 15 YRS	NUMBER
EXTRA PERSONS			
EXTRA PERSONS			
AWNING			
ELECTRIC HOOK UP			
KIDS TENT			
DOG			

### 10. REMITTANCE

DELETE AS APPLICABLE	
TOTAL AMOUNT / DEPOSIT ENCLOSED	£

### CREDIT DEBIT CARD PAYMENT

Mastercard 
 Visa 
 Delta 
 Issue Date...../...../.....  
 Expiry Date...../...../.....

Maestro 
 Solo 
 Switch Issue No..... Issue Date...../...../.....  
 Solo Issue No..... Expiry Date...../...../.....

Security code number (last 3 digits on reverse of card)

Please debit my Card with £  Please fill in amount

Cardholder Name \_\_\_\_\_

Signature \_\_\_\_\_

If you would like us, automatically, to charge your balance due 30 days before your Holiday, tick box.

### YOUR SIGNATURE

I have read and accept the terms and conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Cheques and postal orders should be made payable to **Retanna Holiday Park Ltd**  
Please put your address on the back of your cheque.

**PLEASE STATE WHERE YOU SAW RETANNA ADVERTISED, OR IS THIS A RETURN VISIT?**

**BOOK DIRECT – 01326 340643**