

Pebbles Holiday Let



HOLIDAY BOOKING FORM

Please complete and return with your payment to:-

Julie Hill
c/o The Coastal House
14 Mayors Avenue to
Dartmouth, Devon TQ6 9NG

Please make cheques payable to Coastal Retreats

Your details (of person making booking)

Full name: - _____
Address line 1:- _____
Address line 2:- _____
Town/City: - _____
County: - _____
Postcode: - _____
Home Tel: - _____
Mobile Tel: - _____
email: - _____

Your party – full names of all persons must be listed below – please include age if under 18

Holiday period

1. _____ yrs	No. of nights _____
2. _____ yrs	Date of arrival _____
3. _____ yrs	Date of departure _____
4. _____ yrs	

Do you prefer white or red wine ? _____

Payment section – please complete either section A or Section B
Section A (more than 42 days till holiday) Section B (less than 42 days till holiday)

Deposit £ _____ Total Rent £ _____
(One third of rent)

Security deposit £ 50 (if applicable)

Declaration:-

I declare that I am over 18 years of age and have read and agreed to abide by the all the Booking conditions as detailed on page 2 of this document

Signed _____ Date _____