

Waves Holiday Let



HOLIDAY BOOKING FORM

Please complete and return with your payment to:-

Emma Dixon

c/o The Coastal House

14 Mayors Avenue to

Dartmouth, Devon TQ6 9NG

Please make cheques payable to Emma Dixon

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

Holiday period

listed below – please include age if under 18

1. _____

____ yrs

No. of nights _____

2. _____

____ yrs

Date of arrival _____

3. _____

____ yrs

Date of departure _____

4. _____

____ yrs

5. _____

____ yrs

6. _____

____ yrs

7. _____

____ 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 _____