

La Belle Échappée 4 Chemin des Fosses, Le Clos, Faye L'Abbesse, 79350 **T:** +33 (0)5 49 65 75 63 **T:** 0844 232 1016

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La Belle Échappée - Booking Form - PLEASE COMPLETE IN BLOCK CAPITALS		
Name:	Tel Home:	
Address:	Tel Work:	
	Fax:	
	Email:	
Full Guest Names	Age (if under under 16)	
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
I would like to book the following accommodation:		
Arrival Date:		
Special Requirements - please delete as required:		
Cot (cot linen is not provided) YES / NO	Highchair YES / NO	
I enclose a non-refundable deposit of * £		

I confirm that I am over the age of 18, I have read, understood and agree to the booking conditions and await your confirmation of booking and invoice showing the balance of payment. It is recommended that a separate Travel Insurance with cancellation cover is taken out as in the unfortunate event of you having to cancel, this should enable you to claim non refundable monies.

* PLEASE MAKE CHEQUES PA	AYABLE TO: D BOWSER	
SIGNED:	DATE:	