

ORNITHOLIDAYS Booking Form

Please fill in details carefully using **BLOCK CAPITALS** and make your cheque payable to **ORNITHOLIDAYS**

I/We enclose a cheque for: £..... being deposit/full amount forpersons

I/We would like to make a Green Contribution of: £..... Please add this amount to my final bill.

Please make the following booking on my/our behalf for the holiday to commencing

DEPOSIT: £600 per person Far-Afield Tours
 £300 per person European Tours
 25% of total cost per person Cruises

Date.....

*Signature

**Your signature accepts, in full, the Conditions of Booking as set out in the Ornitholidays' brochure.*

Please complete the following to comply with the details on your passport:

TITLE	FORENAMES or CHRISTIAN NAMES	SURNAME	DATE OF BIRTH	PASSPORT NO.	PLACE OF ISSUE	DATE OF ISSUE	EXPIRY DATE

First name or names by which you would like to be known on the party list:

All correspondence, tickets etc, will be sent to the first-named above at:

Postal code:

Telephone No: home

Telephone No: business

email address

ACCOMMODATION REQUIREMENTS

Please tick where applicable.

Twin/Double

Sharing Twin

Single

Smoker

Non-Smoker

Please note Booking Policy Section 7.

Have you participated in a previous ORNITHOLIDAYS' tour – YES / NO*
 (*Delete as applicable)

Please state here any special food requirements:

Please state here any disabilities or medical conditions which may affect your full participation in a tour. Please also ensure you have read Section 15 of our Conditions of Booking.

Insurance

Please state here the name of the policy you intend to use:

Please return this form to **ORNITHOLIDAYS**

29 Straight Mile, Romsey
 Hampshire SO51 9BB

Telephone: 01794 519445 Fax: 01794 523544

Registered Offices:
 Wessex Travel & Ornitholidays Ltd.,
 4 Duke s Court, Bognor Road, Chichester, West Sussex PO19 2FX