

Chalet Alpage Booking Form

Details of person to whom all correspondence will be addressed

Surname..... First Name..... Title.....

Address:.....
.....

Postal Code:.....Country.....

Telephone (day).....Mobile:

Telephone (evening).....

Fax..... E-mail.....

Arrival Date:..... Departure Date:.....

Number in Group:

Adults..... Children under 12..... Children under 2.....

Declaration:

I have read and understand Chalet Alpage booking conditions.

I confirm that I accept the prices quoted and that I am authorized to accept these and the booking conditions on behalf of all other persons in my group.

I have enclosed or already paid the non-returnable deposit of 10% of the total cost of the reservation, (or the full amount if applicable.) and will pay the balance no less than 8 weeks before arrival.

Please complete and return with a 10% deposit of the cost of your accommodation. The balance is due no less than 8 weeks before arrival.

Reservations made less than 8 weeks before arrival must be paid in full at the time of booking.

All persons in my group will be responsible for their own travel documents, medical, ski and trip cancellation insurance. We highly recommend the French 'Carte Neige' insurance, which can be purchased with your lift pass in addition to your usual holiday insurance.

I confirm I have read and understand the booking conditions Please check box o

Signature

Please return to:

Chris and Jana Burton

Whinlands

Private Road

**Martlesham
Woodbridge
IP12 4SG**

E-mail : chrisjana@btconnect.com