



Agent's Personal Reference

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ABTA No:

Travel Agent's Stamp

PORTUGAL BOOKING FORM 2008

Please return this form to 31 Meeting House Lane, The Lanes, Brighton BN1 1HB
 Tel: +44 1273 747811 Fax: +44 1273 329344 Email: mail@thevillaagency.co.uk

PARTY LEADER'S NAME & ADDRESS FOR CORRESPONDENCE			DAYTIME TELEPHONE:
TITLE:	INITIAL:	SURNAME:	EVENING TELEPHONE:
ADDRESS:			MOBILE TELEPHONE:
			WILL YOU BE TAKING THIS MOBILE ON HOLIDAY: YES / NO
			FAX:
			EMAIL:
POSTCODE/ZIP:	COUNTRY:		IF YOU PROVIDE AN EMAIL ADDRESS YOUR CONFIRMATION/INVOICE WILL BE SENT ELECTRONICALLY

PASSENGER'S NAMES INCLUDING PARTY LEADER PLEASE ATTACH A SEPARATE SHEET WITH THE SAME DETAILS FOR ADDITIONAL PASSENGERS

MR/MRS/MS	INITIAL	SURNAME & DATE OF BIRTH IF UNDER 16 YEARS ON DATE OF TRAVEL	(DD/MM/YY)	OUR INSURANCE
1.				YES / NO
2.				YES / NO
3.				YES / NO
4.				YES / NO
5.				YES / NO
6.				YES / NO
7.				YES / NO
8.				YES / NO
9.				YES / NO
10.				YES / NO
11.				YES / NO
12.				YES / NO
13.				YES / NO
14.				YES / NO

PROPERTY DETAILS

1ST PROPERTY NAME:	REF. N°.	DATES REQUIRED FROM:	TO:
2ND PROPERTY NAME:	REF. N°.	DATES REQUIRED FROM:	TO:

IF YOU ARE ARRANGING YOUR OWN FLIGHTS PLEASE COMPLETE THE SECTION BELOW (OR WRITE TBA IF FULL DETAILS ARE NOT YET KNOWN)

OUTWARD JOURNEY FLIGHT NUMBER:	ARRIVAL TIME:	DATE:	ARRIVAL: FARO / LISBON
RETURN JOURNEY FLIGHT NUMBER:	DEPARTURE TIME:	DATE:	DEPARTURE: FARO / LISBON

CAR HIRE - PLEASE COMPLETE ONE LINE FOR EACH CAR REQUIRED. N° OF ROOF RACKS N° OF CHILD SEATS N° OF BOOSTER SEATS

CAR 1: GROUP	PICK UP AT FARO / LISBON AIRPORT OR VILLA DATE:	RETURN TO: FARO / LISBON AIRPORT OR VILLA DATE:
CAR 2: GROUP	PICK UP AT FARO / LISBON AIRPORT OR VILLA DATE:	RETURN TO: FARO / LISBON AIRPORT OR VILLA DATE:

INSURANCE - IF YOU REQUIRE OUR INSURANCE AND ARE RESIDENT IN THE UK PREMIUMS ARE AS FOLLOWS:

HOLIDAY INSURANCE	ADULTS (18 - 65 YEARS)	CHILDREN (2 - 17 YEARS)	ADULTS (66-75 YEARS)	FAMILY (SEE PAGE 69)
UP TO 5 DAYS	£15	£7.50	£30	£37.50
UP TO 10 DAYS	£18	£9	£36	£45
UP TO 17 DAYS	£21	£10.50	£42	£52.50
UP TO 24 DAYS	£26	£13	£52	£65

CHILDREN AGED UNDER 2 YEARS ON DEPARTURE ARE INSURED FREE WHEN ACCOMPANIED BY AN INSURED ADULT

IT IS A REQUIREMENT THAT **ALL** CLIENTS INSURE AGAINST ALL HOLIDAY RISKS. IF YOU ARE ARRANGING YOUR OWN INSURANCE, PLEASE GIVE DETAILS BELOW:

NAME OF COMPANY:	POLICY NUMBER:
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EXTRAS - PLEASE TICK THE BOXES AS APPROPRIATE & INDICATE IF DATES FOR ITEMS BELOW DIFFER FROM RENTAL PERIOD

DO YOU REQUIRE TAXI TRANSFERS: YES / NO	NUMBER OF PEOPLE ON ARRIVAL:	NUMBER OF PEOPLE ON DEPARTURE:
BASIC FOOD PACK £40	4 PERSON FOOD PACK £53	5 - 8 PERSON FOOD PACK £66
9 - 10 PERSON FOOD PACK £77	11+ PERSON FOOD PACK £90	IF VEGETARIAN, PLEASE TICK HERE:
AIR CONDITIONING/HEATING (IF AVAILABLE): YES / NO	POOL HEATING (IF AVAILABLE): YES / NO	Nº. OF EXTRA BEDS (IF PERMITTED):
FREE COT: YES / NO	Nº. OF ADDITIONAL COTS AT EXTRA COST:	SPECIAL REQUESTS:
FREE HIGHCHAIR: YES / NO	Nº. OF ADDITIONAL HIGHCHAIRS AT EXTRA COST:	TOTAL Nº. OF FANS:
WE WILL PROVIDE 1 FAN PER BEDROOM IF REQUESTED UNLESS ROOM IS AIR CONDITIONED. ADDITIONAL FANS ARE £6 EACH PER WEEK. FAN HIRE ON THE LISBON COAST £10 EACH PER WEEK		

DEPOSIT/FULL PAYMENT & INSURANCE PREMIUMS

PAYMENT CAN BE MADE BY CHEQUE (PAYABLE TO 'THE VILLA AGENCY LTD.')

OR BY CREDIT/DEBIT/CHARGE CARD (PLEASE NOTE THAT A CHARGE OF 1.6% WILL BE ADDED TO EACH CREDIT/CHARGE CARD TRANSACTION & TO NON UK DEBIT CARDS).

PLEASE COMPLETE EITHER SECTION A OR B DEPENDING ON YOUR DATE OF DEPARTURE

A) DEPOSIT PAYMENT - FOR BOOKINGS OVER 8 WEEKS BEFORE DEPARTURE			
VILLA DEPOSIT £70 PER PERSON, BASED ON MAXIMUM SLEEPING CAPACITY OF VILLA NOT NUMBER OF PEOPLE IN PARTY OR 25% OF TOTAL RENT - WHICHEVER IS THE GREATER AMOUNT			£
FLIGHT DEPOSIT (PLEASE NOTE THAT SOMETIMES FULL PAYMENT MAY BE REQUIRED AT TIME OF BOOKING) Nº. FLIGHTS @ £50 PER PERSON			£
FULL INSURANCE PREMIUMS PLEASE NOTE OUR INSURANCE IS VALID FOR UK RESIDENTS ONLY	Nº. ADULTS (18 - 65 YEARS)	@ £ PER ADULT	£
	Nº. CHILDREN (2 - 17 YEARS)	@ £ PER CHILD	£
	Nº. ADULTS (66- 75 YEARS)	@ £ PER ADULT	£
	FAMILY	@ £ PER FAMILY	£
TOTAL DEPOSIT PAYABLE FOR BOOKINGS OVER 8 WEEKS BEFORE DEPARTURE			£

B) FULL PAYMENT - FOR BOOKINGS 8 WEEKS OR LESS BEFORE DEPARTURE			
VILLA RENTAL			£
FLIGHTS (IF COST KNOWN AT TIME OF BOOKING)			£
FULL INSURANCE PREMIUMS PLEASE NOTE OUR INSURANCE IS VALID FOR UK RESIDENTS ONLY	Nº. ADULTS (18 - 65)	@ £ PER ADULT	£
	Nº. CHILDREN (2 - 17 YRS)	@ £ PER CHILD	£
	Nº. ADULTS (66- 75 YEARS)	@ £ PER ADULT	£
	FAMILY	@ £ PER FAMILY	£
EXTRAS: TAXIS, FOOD PACKS, EXTRA BEDS, POOL HEATING, AIR CONDITIONING, ADDITIONAL COTS, HIGHCHAIRS, FANS			£
CAR HIRE: CAR 1	Nº. WEEKS @ £ PER WEEK		£
CAR 2	Nº. WEEKS @ £ PER WEEK		£
REFUNDABLE SECURITY DEPOSIT (SEE PRICE PANEL)			£
TOTAL PAYMENT FOR BOOKINGS 8 WEEKS OR LESS BEFORE DEPARTURE			£
PLEASE DEBIT MY CREDIT/DEBIT/CHARGE CARD/I ENCLOSE A CHEQUE FOR			£

CREDIT/DEBIT/CHARGE CARD DETAILS (PLEASE NOTE THAT A CHARGE OF 1.6% WILL BE ADDED TO EACH CREDIT/CHARGE/NON UK DEBIT CARD TRANSACTION)

CARD NUMBER:

I AUTHORISE THE BALANCE SHOWN ON MY INVOICE TO BE DEBITED FROM MY ACCOUNT 8 WEEKS BEFORE DEPARTURE (PLEASE DELETE IF YOU DON'T WANT US TO DO THIS)

CARD HOLDER'S NAME (& ADDRESS IF DIFFERENT FROM REVERSE):

VALID FROM: EXPIRY DATE: TYPE OF CARD: ISSUE Nº. LAST 3 DIGITS OF SECURITY CODE (ON REVERSE OF CARD):

DECLARATION PLEASE CHECK THE BOOKING FORM CAREFULLY AS A CHARGE WILL BE MADE FOR ANY AMENDMENTS

I CERTIFY ON BEHALF OF THE PERSONS NAMED ON THIS BOOKING FORM THAT I HAVE READ AND AGREE TO THE CONDITIONS OF BOOKING AND INSURANCE AND HAVE READ THE BROCHURE/WEBSITE DESCRIPTION RELEVANT TO MY HOLIDAY AND ESSENTIAL HOLIDAY INFORMATION CONTAINED IN THIS BROCHURE/WEBSITE. I HAVE NO KNOWLEDGE OF ANY REASON WHICH MAY GIVE RISE TO THE CANCELLATION OR CURTAILMENT OF THIS HOLIDAY, OR A CLAIM UNDER ANY INSURANCE POLICY. I HAVE INSURANCE COVER COMPARABLE OR GREATER THAN THE COVER OFFERED BY THE VILLA AGENCY. I UNDERSTAND THAT ONLY PERSONS NAMED ON THIS FORM MAY OCCUPY THE VILLA, AND THAT THE VILLA AGENCY DOES NOT ACCEPT SINGLE GENDER BOOKINGS UNLESS AGREED. I AM OVER 18 YEARS OF AGE.

SIGNED:..... DATE:.....

PLEASE TELL US HOW YOU HEARD OF THE VILLA AGENCY

IF YOU HAVE TRAVELLED WITH US BEFORE PLEASE TELL US WHICH VILLAS YOU HAVE STAYED IN:

IF WE WERE RECOMMENDED PLEASE TELL US WHO BY (NAME & ADDRESS):

IF YOU HEARD ABOUT US VIA A NEWSPAPER OR THE INTERNET. PLEASE GIVE DETAILS (SUNDAY TIMES, MAIL ON SUNDAY, GOOGLE ETC.):