



Agent's Personal Reference

Travel Agent's Stamp

.....  
ABTA No: .....

## BOOKING FORM 2012

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

<b>PARTY LEADER'S NAME &amp; ADDRESS FOR CORRESPONDENCE</b>			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

### NAMES INCLUDING PARTY LEADER & INFANTS UNDER 2 YEARS

MR/MRS/MS	INITIAL	SURNAME & DATE OF BIRTH IF UNDER 16 YEARS ON DATE OF TRAVEL	(DD/MM/YY)
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### PROPERTY DETAILS

1ST PROPERTY NAME:	REF. N <sup>o</sup> .	DATES REQUIRED FROM:	TO:
2ND PROPERTY NAME:	REF. N <sup>o</sup> .	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<sup>o</sup>. OF ROOF RACKS ..... N<sup>o</sup>. OF BABY SEATS ..... N<sup>o</sup>. 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:

