

OrlandoLuxurySunshineVilla.com Rental Booking Form

PARTY LEADER

Name : _____

Address : _____

Post code : _____

Country : _____

Day telephone : _____

Evening telephone : _____

Email : _____

Arrival date : _____

Departure date : _____

Are these dates likely to change: _____. If so, please explain below

Numbers in party : (Adults) _____ (Children) _____

DETAILS OF OTHER PARTY MEMBERS

	Mr/Mrs/Miss	Initials	Surname	Age (if under 18)
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____

EXTRA FACILITIES

Visit our website at <http://www.orlandoluxurysunshinevilla.com/>

Feel free to contact the owners (Deanne Ambrose) in the UK:

E-mail deanne.ambrose@uwclub.net

Telephone **01403 260939**

SPECIAL REQUIREMENTS

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I agree that, in the event of any problem arising during my holiday, I will contact the local management company. Failure to do so will result in no liability being accepted in respect of subsequent claims received.

I certify on behalf of the persons included on this booking form that I am authorized to make this booking.

I have read and agree to the terms and conditions as set out in the details.

I enclose a cheque for £100 sterling per week for the non-refundable deposit. (The completed booking form and deposit needs to be returned within 7 days of your initial reservation being accepted).

I agree to pay the balance in full no later than Eight weeks prior to my arrival date /I enclose a cheque for _____, in full payment for this rental. (Delete as applicable).

All Cheques should be made payable to 'Deanne and Graham Ambrose'. Please contact us for the Billing address.

**Signed..... Date.....
(PARTY LEADER)**

Please print name

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