Booking Form

Web: www.tremorvahcottage.co.uk

Email:enquiries@tremorvahcottage.co.uk

PLEASE USE BLOCK CAPITALS

Tel: 01736 363881

NAME	Mr/Mrs/Miss or Title		INITIAL		SURNAME				
ADDRESS									
POSTCODE									
TELEPHONE HOME					MOBILE				
E - MAIL									
DATES REC	UIRED	ARRIVAL DATE		DEPART DATE					
TOTAL No IN PARTY		ADULTS		CHILDREN		AGES			
HOW DID YOU HEAR ABOUT US?									
IF INTERNET DO YOU REMEMBER WHICH WEBSITE YOU FOUND US ON?									
VISIT BRITAIN PENZANCE ON LINE									
I would like to book Tremorvah Cottage for the dates indicated and will be responsible for my party									
not exceeding 4 in number. I undertake to leave the property in a clean and tidy state on my									
departure and take full responsibility for any breakages, damages or losses. I have read and agree to									
the TERMS and BOOKING CONDITIONS I am over 18 years old.									
Signed Date									
I enclose a cheque made payable to Christopher Wilson for the :									
DEPOSIT (IF MORE THAN 8 WEEKS PRIOR TO ARRIVAL - 30% TOTAL RENT)							£		
OR									
TOTAL RENTAL (IF LESS THAN 8 WEEKS FROM START OF HOLIDAY)							£		
ADD						'			
SEPARATE CHEQUE FOR DAMAGE/ GOOD HOUSEKEEPING DEPOSIT (PAYABLE 8 WEEKS PRIOR TO ARRIVAL)							£100.00		
PLEASE SE	ND TO	CHRISTOP	HER WILSON						
	WARWICK HOUSE, 17 REGENT TERRACE,								
PENZANCE, CORNWALL, TR18 4DW									