Equestrian Escapes

BOOKING FORM

Name and address for correspondence:	Home telephone:	Work Telephone:	Mobile Telephone:
	E-mail:		

Which holiday are you booking?					
Outbound date:		Flight number:		Arrival time:	
Return date		Flight number:		Arrival time:	

Please enter the names and addresses of all members of your party.

Name	DOB	Rider Y/N	Height (m)		Weight (kg)	
Address		**Experience:**				
Special Diet						
Name	DOB	Rider Y/N	Height (m)		Weight (kg)	
Address		**Experience:**				
Special Diet						

Travel Insurance is mandatory for all clients. Equestrian Escapes offers a comprehensive insurance policy that includes cover for personal belongings, cancellation, medical problems and it is, of course, valid for those participating in horse riding activities. Due to new government regulations this now needs to be booked directly by you with the insurance company, a link will be sent through to you.

If you do not wish to use our insurance, please confirm that you have alternative insurance.

I wish to pay by: Cheque Bank Transfer (please ring for bank details) Credit card

Please debit my Mastercard/Visa/Maestro/Switch (delete as applicable) the sum of £_____(Please note that a 2% surcharge will be added to credit card payments)

Card number: _____

Expiry date: _____

Issue number: _____

Security number: _____

Address of cardholder (if different to correspondence address):

_____

_____

_____

Deposit now included £_____

Balance due 8 weeks before departure (6 weeks for UK trips) £_____

Signature of Individual or Group Leader to indicate acceptance of booking conditions: ----------

PRINT NAME: ----------

Please return this form to **Equestrian Escapes, Rose Cottage, Common Lane, Duddon, Tarporley, Cheshire, CW6 0HG**. If you have any queries please call **Sarah Caplan on 01829 781123/07946754814** or email **sarahcaplan@equestrian-escapes.com**.