

BOOKING FORM

AGENT'S STAMP

BOOKING REFERENCE

Mr	Mrs	Miss	Ms	Initial	Surname
Address					
Postcode					

Home Phone	
Work Phone	
Mobile Phone	
E-mail Address	

BOAT

BASE

DATE

NO. OF WEEKS SHORT BREAK RETURN TO SAME BASE

DOUBLE DUVETS REQUIRED SINGLE DUVETS REQUIRED

BUOYANCY AIDS XL L M S B

NO. OF PETS (MAX 2 PER BOAT) CRUISED BEFORE YES NO

	Mr/Mrs Miss/Ms	Initial	Surname	Under 12	Adult	Senior Citiz
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

If you have booked a holiday with Anglo Welsh before, you may qualify for our Loyalty Bonus Scheme. Please contact us for details.



Anglo Welsh Waterway Holidays, 2 The Hide Market, West Street, Bristol BS2 0BH
 Tel: +44 (0)117 304 1122 Fax: +44 (0)117 304 1133
 Email: bookings@anglowelsh.co.uk www.anglowelsh.co.uk

A	Basic Brochure Holiday Price	<input type="text"/>
B	Concession 'ONE'	<input type="text"/>
C	Concession 'TWO'	<input type="text"/>
D	Concession 'THREE'	<input type="text"/>
E	Loyalty Bonus	<input type="text"/>
F	Winter Break Offer	<input type="text"/>
G	Cancellation Scheme	<input type="text"/>
H	Damage Waiver	50.00
I	Additional Pet	<input type="text"/>
J SUB TOTAL		<input type="text"/>
K	Maps/Video/DVD N ^{os}	<input type="text"/>
L TOTAL		<input type="text"/>
M	(Min 25% of Box A) DEPOSIT Plus Cancellation scheme	<input type="text"/>
N BALANCE		<input type="text"/>

CREDIT CARDS *
 VISA AMEX M/CARD
 DEBIT CARDS
 MAESTRO SOLO DELTA

1 Please charge my initial payment to my credit/debit card now

2 Also please charge the whole of the balance (plus any additional items then due) to my credit/debit card account six weeks before the date of my holiday

3 Please charge the full cost of my holiday now

* NB a surcharge of 2% will be added to Credit/Charge Card payments
 Please make cheques payable to ANGLO WELSH WATERWAY HOLIDAYS

YOUR CARD NUMBER

YOUR CARD VALID FROM EXPIRES END SWITCH CARD ISSUE NUMBER

CARDHOLDER'S NAME

I AM OVER 18 AND I HAVE READ AND AGREE TO BE BOUND BY THE CONDITIONS OF HIRE PRINTED IN YOUR BROCHURE.

Signed

Date

YOUR SIGNATURE IS REQUIRED TO VALIDATE INSURANCE WHILST OUT ON THE BOAT. YOU WILL NOT BE ABLE TO CRUISE WITHOUT GIVING THIS SIGNED ACCEPTANCE OF OUR TERMS AND CONDITIONS.

Booking Form

Please tear along perforation