

# Catered Chalet Holiday Booking Form



Chalet:	Du Coin	Arrival date		No. of nights :		No. of people in party	
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Party Leaders Details, please also include as 1<sup>st</sup> group member below:

Full Name							
Postal Address							
Contact details	Daytime/eve tels:			Mobile:		e-mail	

Group, accommodation, and travel details. Include Party Leader. Note that all addresses and any special requirements must be provided overleaf

R E F	Surname	First Name	Age at arrival <small>(If under 18)</small>	Room No./name Booked	Travel Details						Cost incl any empty bed supplement €
					If travelling by car (airport transfer not required) please note this in the Flight No Column and give intended arrival and departure times						
					Flight no	from	Flight Arrival time	Arrival date	Dep date	Flight dep. time	ALL PRICES IN €UROS
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											

If you are booking less than 8 weeks in advance you must pay the Holiday Total, otherwise pay the deposit. The Balance due must be paid no less than 8 weeks before departure

We accept Visa, Mastercard and Carte Bleu without additional charge. To pay by credit card simply complete and sign the payment mandate below and then phone us with your credit card details. Please do not email fax or post the details to us as this is not necessarily secure.

We also accept French Cheques in Euros, Please make cheques payable to "lesgetschalets" and send with the completed booking

Name on card		Card type	
		Signature	
Or Cheque enclosed in Euros		Date	

Holiday Total	
25% deposit	
Balance	

Group Addresses and Special Requirements. Please mention any need for high chairs, cots, car baby / booster seats and dietary requirements.

Group Member REF No (from overleaf)	Name	Home address	Special Requirements
1	Party Leader	As overleaf or -	
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			

**DECLARATION by Party Leader**

I have read your attached booking conditions and accept them on behalf of all my party who will reside in the property, on whose behalf I am duly authorised to make this agreement. I am over 18 years of age.

Signature

Date

Roger and Liz Leyland

lesgetschalets

Chalet Girolez

865 route de Magy, Le Crinaz

74260 Les Gets, France

Tel 0033 954 60 04 74 Fax 0033 959 60 04 74  
 Roger 0033 688 60 16 15 Liz 0033 679 75 33 95  
 info@lesgetschalets.com www.lesgetschalets.com

NB In accepting a group booking we expect to receive any sums due in one amount and that any division of the price should be settled between group members. If group members wish to pay us separately, then they must complete and sign their own booking form. In this case any group discounts will not apply.