BOOKING FORM





www.classic-collection.co.uk

Classic Collection Holidays, Saxon House, Little High Street, Worthing, West Sussex, BN11 1DH

Reservations: freephone 0800 008 7288 or 0800 820 3113 or 01903 823088 **Admin**: freephone 0800 008 7289 or 01903 836621 **Accounts**: freephone 0800 294 9326 or 01903 836654 **Fax**: 01903 214945 **email**: sales@classic-collection.co.uk

BOOKING REFERENCE DEPOSIT REMITTANCE A deposit of £150 per person (or an agreed sum to cover non-refundable flight FLIGHTS and/or hotel costs) is payable at the time of booking or full payment where travel is Date of **UK** Airport Resort Airport Classic Airline No. within 8 weeks contact name class from niahts departure to Deposit (£150 per person unless otherwise advised) £_ Number of guests travelling ACCOMMODATION Total £ -No. Niahts Room Type/Facilities | Board Basis Hotel/s TRAVEL INSURANCE (TRAVEL AGENTS/CUSTOMERS OWN - delete as applicable) Policy No. 24hr Repatriation Service 3rd TRAVEL INSURANCE INDEMNITY IMPORTANT - To be signed as a condition of booking if the above **CAR HIRE** travel insurance details are not completed in full at time of booking. Group No. Days Start date/place Return date/place I have declined to take out insurance cover offered by the Travel Agent through whom the arrangements have been made (if relevant). I hereby undertake on behalf of myself and all members of my party to arrange adequate holiday insurance. Furthermore I absolve the Tour PERSONAL INFORMATION Date of birth Operator and Travel Agent of all possible liabilities which may arise due Please complete in full for airline security purposes dd/mm/vv to failure to take out adequate insurance cover. Full name (including title) Signed_ Date _ Nationality Full name (including title) CREDIT/DEBIT CARDS (MASTERCARD/VISA/AMEX/MAESTRO/SOLO) I authorise you to debit my card with the following amounts Deposit £ Full name (including title) Final balance £ _ (debited 8 weeks Passport number & issue/expiry date Cardholder Name Address (if different from Lead Customer's address) Passport number & issue/expiry date **SPECIAL REQUESTS** (not guaranteed) Sianed Expiry Date Issue (if applicable) DISABILITIES/MOBILITY DIFFICULTIES CHECKLIST REQUIRED **BOOKING CONDITIONS** (Must be signed in all instances) LEAD CUSTOMER or TRAVEL AGENT ADDRESS (Must be completed in all instances) I have read the Holiday Information and Booking Conditions and accept this on behalf of all persons listed. I also acknowledge that each person listed is personally responsible for fulfilling immigration

HOLIDAY BOOKING CHECKLIST

If you would like assistance with any of the following – simply call us on freephone 0800 008 7289 or 01903 836621 for availability and prices

Before you depart

Tel (Home)

Tel (Work)

ABTA/AGENT no.

- 1. Airport car parking and Meet and Greet
- 2. Airport lounges (UK and overseas)
- 3. Airport hotel reservations
- 4. Travel insurance (see booking form above)
- 5. Pre book spa, golf & diving packages
- 6. Pre book car hire
- 7. Pre book excursions

On your flight

AGENT Ref

- Business class seats on most scheduled aircraft
- 2. Pre-allocated and pre-allocated group seating with many airlines
- Seat upgrades including Premium, Plus, or extra legroom seats on some charter aircraft

In your hotel

Emergency/out of hours contact tel no. -

Signed (Lead Customer) -

- Room upgrades to superior rooms and/or iunior suites and suites
- Flexible dining in most hotels means that you can pre-book any number of evening meals/half board
- 3. Spa treatments and packages
- 4. Golf packages including pre-booked tee times
- 5. Excursions in resort

and health requirements. I am over 18 years of age.

6. Car hire for all or part of your stay