

Croatia

Sunday 02 – Sunday 09 October 2011



Please complete this form in **BLOCK CAPITALS** and return it to Heritage Group Travel at the address below, together with your deposit of **£300 per person**, plus your insurance premium if required, **as soon as possible** and no later than **22 June 2011**. Please make cheques payable to 'Heritage Group Travel' and return to:

Heritage Group Travel
Charlotte House, 12 Charlotte Street, Bath BA1 2NE

Participant 1

Title:
First name:
Surname:
<i>(Name must be exactly as written on your passport)</i>
Name as you wish to be known on the list of tour participants:
Address:
Postcode:
Telephone No:
E-mail:
Passport Details This information is required by some airlines and hotels. Date of Birth: Nationality: Passport Number: Expiry Date (dd/mm/yy): Issue Date (dd/mm/yy): Country of Issue: Issuing Authority (eg UKPA):
Contact person in event of an emergency whilst on the tour: Name: Daytime Tel No: Evening Tel No:
Special Requests (e.g. dietary or health requirements - <i>please note that special requests cannot be guaranteed</i>):
It is a condition of booking that each tour participant carries full travel insurance. I am insured with: Tel No: Policy Number: <u>or</u> I wish to take Heritage Group Travel's insurance and enclose my completed form and premium of: £

Participant 2

Title:
First name:
Surname:
<i>(Name must be exactly as written on your passport)</i>
Name as you wish to be known on the list of tour participants:
Address <i>(if different from participant 1)</i> :
Postcode:
Telephone No:
E-mail:
Passport Details This information is required by some airlines and hotels. Date of Birth: Nationality: Passport Number: Expiry Date (dd/mm/yy): Issue Date (dd/mm/yy): Country of Issue: Issuing Authority (eg UKPA):
Contact person in event of an emergency whilst on the tour: Name: Daytime Tel No: Evening Tel No:
Special Requests (e.g. dietary or health requirements - <i>please note that special requests cannot be guaranteed</i>):
It is a condition of booking that each tour participant carries full travel insurance. I am insured with: Tel No: Policy Number: <u>or</u> I wish to take Heritage Group Travel's insurance and enclose my completed form and premium of: £

Room Requirements

I wish to share a twin / double room (please delete as appropriate) with: _____

(Please specify the name of the person with whom you wish to share. Unfortunately we are unable to offer a "willing to share" option).

I require a single room and agree to pay the single supplement of £200 with my final balance payment

N.B. Limited number of single rooms available

Payment

I / We wish to book _____ places on the above tour and enclose a deposit of **£300 per person**, as follows:

I enclose a cheque for the sum of £_____ made payable to Heritage Group Travel

Please debit £_____ (plus 2% service charge) from my Visa/MasterCard

Please debit £_____ from my debit card (no service charge)

Visa / MasterCard / Debit Card <i>(Please delete)</i> :	
Name of Cardholder <i>(as written on the card)</i> :	
Billing Address <i>(if different from address overleaf)</i> :	
Card Number:	Expiry Date:
Security Code (the last 3 digits on the signature strip on the reverse of your card):	

I have read and understood Heritage Group Travel's booking conditions and confirm that I have adequate insurance for this tour <input type="checkbox"/>	
Signature: _____	Date: _____



HERITAGE GROUP TRAVEL

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Fax: 01225 482236



Heritage Group Travel is a trading name of Group Travel Connection Ltd

