

Family Holidays Booking Form



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info@rockleywatersports.com or www.rockleywatersports.com

Please give the name and details of the person to whom ALL correspondence and invoices should be sent. This person should also sign the declaration below. Please complete in block capitals.

Party Leader : [Mr/Mrs/Ms/Miss] Occupation :

Address :

Postcode : Email : Tel No. [day] :

Tel No. [evening] : Mobile No : How did you hear about us?

Centre & Accommodation (Please tick relevant box.)

Centre: La Reserve AzuRivage Accommodation: None Required Rockley Watersports Chalet
 Holiday Duration : 1 week 2 weeks Start Date : Sun to Sun Number in Party :

*Rockley Watersports Chalet Tents are available from Sunday [arrival 18.00] to Sunday [departure 10.00]

Courses

Surname	First Name	Age	Sex	Course Code*		Course Dates [wk1]		Sailing Experience (#)	Insurance [~]	Log Book	Lunch <input type="checkbox"/>
				[wk1]	[wk2]	From	To				
									Yes		
									Yes	Delete if not required	
									Yes		
									Yes		
									Yes		
									Yes		

* COURSE CODE Please enter appropriate Course Code, see pages 19-23 in our brochure. #SAILING EXPERIENCE Please specify what RYA qualification you have or enter appropriate number according to your sailing ability 1 = Beginner, 2 = Improver, 3 = Advanced. ~INSURANCE If you do not wish to take out our insurance cover, please ensure that you have comparable insurance cover for all above party members. This should include cancellation cover, a 24 hour emergency service and does not exclude watersports activities. LUNCH Please specify if a special diet is required.

Medical

Emergency Contact Name : Telephone No : Relation :

Please give details of any medical conditions/allergies/disabilities :

Please give details of any medication you are receiving for any condition :

It is your responsibility to make known any potential medical conditions that may effect your own personal safety during the activities associated with the course/holiday as booked.

Course Fee

I enclose either :

Full Payment [courses booked less than 56 days in advance]:

or :

Deposits for Holiday including Accommodation :

..... @ £130 per person

Deposits for Courses **ONLY** :

..... @ £50 per person

Extras:

Insurance Premiums Adults/Children [2 years+]

Up to 9 days @ £26

Up to 21 days @ £36

Dates

to

to

TOTAL

INSURANCE MUST BE PAID AT THE TIME OF BOOKING FOR CANCELLATION COVER TO BE EFFECTIVE

Declaration

[I understand that]

- The deposit is **NOT** refundable once a holiday/course has been confirmed unless the course is cancelled by Rockley Watersports.
- Refunds due to cancellations are in accordance with our booking conditions and/or the insurance policy.
- I certify that on behalf of the person(s) included on this form by whom I warrant I am able to make this booking that I have read and agree to the booking conditions sent with this form.

Signature : **Date** :

Payment Methods

Cheque Details [Please make cheques payable to **Rockley Watersports Ltd**]:

I enclose a cheque for : £..... being the **Deposit /Full Payment**

[Please circle relevant statement]

Credit Card Authorisation

Name & address of Cardholder :

Switch Issue No : Expiry Date :

Please charge my card with the following amount £

Mastercard / Visa / Switch Number

Please debit full balance from my card 56 days before departure date :

YES NO Signature :

Office Use Only

Party Name :

Booking Ref No : F7

Total : £

Deposit Paid : £

CHQ CC CSH Date :

Bal Paid : £

CHQ CC CSH Date :

Ins reqd Issue Date :

Accommodation : None Tent

Brd Comp

Final Join Inst : LB

Details Sent To France