

# LAKEVIEW LODGE BOOKING FORM

PLEASE COMPLETE THIS FORM, GIVING AS MUCH INFORMATION AS POSSIBLE AND RETURN WITH YOUR DEPOSIT OR FULL PAYMENT.

Please enter details of person in charge of holiday:

Name- Mr/Mrs/Ms/Miss.....

Address- .....

.....Postcode-.....

Contact Tel No-..... Mobile Tel No-.....

E-Mail Address:.....

Date of Lodge Hire: From..... To.....

Total number of nights.....

Total number of adults..... Number of children under 18yrs.....

Total Holiday Cost..... Deposit / Total Amount Enclosed.....

Balance Remaining..... Due Date (6 weeks before) .....

For security purposes only:

Number of vehicles ..... Registration numbers.....

## DECLARATION:

I have read and agree to accept the terms and conditions of booking. I am over 18 years of age and agree to be responsible for the balance of the hire of the Lodge due to be paid four weeks prior to arrival date. I agree to leave the Lodge in a clean & tidy condition and be responsible for all damage and breakages during the hire period.

Signature..... Date.....

Please return with agreed deposit or full payment to:

Mr & Mrs Mallen  
Shortheath Water  
Shortheath Road  
Moir  
Swadlincote  
Derbyshire  
DE12 6BW

Please make cheques payable to: **Lakeview Lodges**