**COOMBE VIEW FARM CAMP & CARAVAN SITE**

**STATIC CARAVAN BOOKING FORM**

**PLEASE RETURN COMPLETED FORM TO: Coombe View Farm Camp & Caravan Site, Woodhead, Branscombe, Seaton, Devon, EX12 3BT or email form to:** [**glaspers@btconnect.com**](mailto:glaspers@btconnect.com)

**Please remember to include a deposit with your booking form or full payment if your stay is within 30 days from the date of booking. This can be in the form of a cheque (made payable to Glaspers Clients Account Number 2) or a bank transfer if you prefer (Account Number: 23383024 Sort code: 20-30-47). We accept card payments over the telephone during office hours only.**

**THE BALANCE IS DUE 30 DAYS PRIOR TO ARRIVAL.**

**PLEASE USE CLEAR BLOCK CAPITAL LETTERS**

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| **PLEASE NOTE:** Pets are only allowed in the caravans by prior arrangement **WITH** an additional charge for this at £15 per animal per week. **Caravans Sleep 4/6**  **PLEASE ALSO NOTE: Pillows & Duvets are provided but you will need to bring your own bed linen and towels.**  **Bedding packs are available to hire at £12 per double bed & £8 per single bed** |

**Names of other persons:**

**2.**

**3.**

**4.**

**5.**

**6.**

**PETS: please state:**

|  |
| --- |
| **Name of Principal:**  **Address:**  **Postcode:**  **Tel:**  **Email:** |

**\*\***It is further suggested that if you do not hold **Holiday Cancellation Insurance** that will cover your Booking you might like to complete the enclosed, as both Deposits and Final Payments are not refundable, should you have to cancel.**\*\***

I, the undersigned have read your conditions of booking and understand and agree to conform to them. I hereby warrant that all members of the party agree to the terms and conditions of hire. I am over 18 years of age.

**PLEASE RESERVE (Please tick as applicable)**

**SEA VIEW: FIELD VIEW:   
  
Date of arrival** from 4pm on Saturday: **Date of leaving** 10am on Saturday:

**Bedding packs if required (please number) DOUBLE: SINGLE:**

Signed:........................................................................................ Date:........................................................................

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| **FOR OFFICE USE ONLY**Date Rec. | Amount of Deposit | Date Balance Rec. | Amount Rec. |
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