

BOOKING FORM

To be returned to:-

Mrs M Tonizzo
5 Abbey View Gardens
Bath
BA2 6DQ
United Kingdom

Please note cheques should be made payable to M Tonizzo

Name
(Surname) (Title) (Initials)

Address
.....
.....

Telephone(home) (business)
(code) (number) (code) (number)

Email address.....(mobile).....

Number in party

Dates of letting: Arrival date Departure date

I enclose £..... (which is a deposit of 50% of the total amount **or** full amount if less than eight weeks before commencement of letting)

I will arrive at the apartment/ Marco Polo airport/ Treviso airport (please delete)

athours (Flight arrival time is sufficient if arriving by air)
(NB If you have not yet made your travel arrangements please notify not less than two weeks before arrival date.)

My approximate time of departure from the apartment will be

I have read and accept the conditions of booking.

Signature Date