Highland Meadows Villa Booking Form.

NAME_____
ADDRESS_____
_____POSTCODE_____
DAY TEL:_____EVENING:_____MOBILE_____
EMAIL_____FAX_____
DATES REQUIRED. ARRIVING_____
DEPARTING_____
LIST ALL OCCUPANTS IN YOUR PARTY. STATING AGES IF UNDER 21 (REQIRED BY FLORIDA LAW)

TITLE	FULL NAME	AGE IF UNDER

COSTS:
NUMBER OF NIGHTS INCL US TAX:_____ @ DAILY RATE OF _____ = TOTAL_____

NUMBER OF WEEKS INCL US TAX:_____ @ DAILY RATE OF _____ = TOTAL_____

OPTIONAL POOL HEAT @ £80/$125 PER WEEK OR £12/$22 PER DAY = TOTAL_____

TOTAL COSTS ☐

I WOULD LIKE FREE USE OF COT/CRIB ☐ **HIGHCHAIR** ☐

Bookings are not accepted until a deposit of 20% has been paid. The balance is due 8 weeks prior to departure.
I agree to pay the balance 8 weeks prior to departure.
I understand that a security deposit of £200/$300 must be paid with the balance and will be returned to me after inspection by Management Company.

I have read, understand and accept the terms and conditions as stated on behalf of my party and myself. I am over 21 years of age.

SIGNATURE_____DATE_____
Please make all cheques payable to M PUGH and send to Lowgrounds Farm, Swineshead, Boston. Lincs. PE20 3PG United Kingdom.