

BOOKING FORM

Please ensure you have read our booking conditions before completing and signing this form

Please write in block capitals where appropriate.

Name of tour _____

Travellers' names (as you would like to see them on guest list)

Title	FIRST NAME	SURNAME	Room Type		
			Twin (2 beds)	Double (1 bed)	Single
1	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____

Address for correspondence

_____	Tel (work)_____
_____	Mobile_____
_____ Post code_____	Fax_____
Tel (home)_____	Email_____

Further information e.g. special requests or dietary requirements

Emergency/next of kin (must be completed at time of booking)

Name_____	Tel (home)_____
Address_____	Tel (work)_____
_____	Mobile_____
	Relationship_____

Passport details (essential in case of emergency)

TITLE	SURNAME	FIRST NAME(S)		NATIONALITY	
1					
2					
3					
4					
DATE OF BIRTH (DD/MM/YY)	PLACE OF BIRTH	PASSPORT NO	PLACE OF ISSUE	DATE OF ISSUE (DD/MM/YY)	DATE OF EXPIRY (DD/MM/YY)
1					
2					
3					
4					

Payment

<p>DEPOSIT (£200 per person) per person total*</p> <p style="text-align: center;">£</p> <hr/> <p>* +£10 fee per transaction if paying by Paypal</p> <p>OR FULL PAYMENT</p> <p style="text-align: right;">per person total*</p> <p style="text-align: center;">£</p> <hr/> <p>* +£10 fee per transaction if paying by Paypal</p>	<p>METHOD OF PAYMENT</p> <p>By sterling cheque payable to Sharon Kivity, by electronic transfer in sterling <i>OR</i> online through Paypal http://www.paypal.co.uk/uk This latter incurs a surcharge of £10 per transaction. Further details on electronic bank or Paypal transfer will be given at the time of your provisional booking.</p> <p>Please tick as appropriate: I wish to pay</p> <p>by cheque _____ by BACS _____ via Paypal _____</p>
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How did you hear about this tour?

SHARONARTS' website _____ Other (please specify) _____



From time to time, we may send you information by email newsletter or post on other SHARONARTS' tours and events such as UK concerts and performances. If you do NOT wish to receive such information, please tick here: _____

Declaration: I have read and understood the booking conditions and accept them on behalf of myself and all members of my party listed on this form.

SIGNATURE _____

DATE _____ 2008

Send to: Sharonarts, 19b Albert Road, Teddington, London TW11 0BD