LOCHGILPHEAD CARAVAN PARK
BANK PARK, LOCHGILPHEAD, ARGYLL. PA31 8NX
BOOKING FORM

Tele: 01546 602003

Name : _____Mr/Mrs/Miss
Address : _____
_____
_____
Post code/Zip_____
Telephone _____
E-mail _____ **I wish to reserve Type No.** _____

From 2:30p.m ._____ (Day) ___/___/___ (Date) to 10a.m. _____ (Day) ___/___/___(Date)

For _____Weeks @ **£** _____ per week = **£** _____

My Group will consist of: - Names :

_____
_____
_____
_____
_____
_____

Less any Discount:

Senior Citizen	= **£** _____
Singles / Couples	= **£** _____
Second Week	= **£** _____
Total Discount	= **£** _____
TOTAL AFTER DISCOUNT	= **£** _____

Add any extras.

Please tick if you require :

High chair ❑
Camping Cot ❑
Fire Guard ❑
(No charge is made for above)

Pets:- = **£** 20.00

TOTAL TO PAY ..... = **£** _____

Deposit of **£ 80 per week.**
(Balance due 4 weeks before holiday). **£** _____
Full Payment now. **£** _____

Balance Due: = **£** _____

If paying by cheque please make amount due payable to: **"Lochgilphead Caravan Park"**
I enclose the sum of **£**_____ being deposit for the hire of caravan holiday home as above.

CREDIT CARD DETAILS

If you wish to pay by Credit Card [**MasterCard / Visa / Switch / Solo**] or Debit Card then please complete :-

Credit Card Expiry Date: ☐☐ ☐☐

or

Debit Card Start Date: ☐☐ ☐☐ Issue No: ☐☐

My Card Number is:

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Please enter the last 3 digits of your security number located on the reverse of your card. ☐☐☐

Amount to be paid:

£ _____

Cardholders Signature: _____

I will pay the balance one calendar month before arrival. I agree to absolve the proprietors from all liability for any accident to myself or members of my party, and for loss or damage to personal property. I undertake to leave the caravan holiday home in a clean and tidy condition and to pay for any breakages or damage to the said caravan and its contents.

Signature: _____ Date: _____