

# BOOKING FORM

Tour description

Date

.....  
.....

Title

Initials

First name

Surname

Date of Birth

.....  
.....  
.....

\*I/We require a twin/double/single room [delete as necessary]

\*Any special requirements.....

**Please note:** If you are prepared to share but no other person wishes to do so, then we will have to charge you the single supplement as indicated in the brochure.

**Name & Address (BLOCK LETTERS)**

.....  
.....  
.....  
.....  
.....

**Telephone: Home**..... **Work**.....

**Email Address:**.....

I have read the booking conditions and enclose a cheque for £.....  
made payable to "**Island Ventures**" as a deposit for the above Tour.

**Signed**.....

**Dated**.....

Where did you see/read of **Island Ventures**? .....

Please send your cheque together with your fully completed Booking Form to:

**Island Ventures**  
2 Kendal Meadow  
Chestfield  
Whitstable  
Kent CT5 3PZ