

Ref:

Booking Form 2010-2011

Suite 21
Blackburn Enterprise
Centre
Furthergate
Blackburn, BB1 3HQ
Tel: 01254 504970



Compulsory Passenger Information (without this information we cannot confirm your booking)

Passenger Details:	Lead Passenger	Second Passenger
Last Name (as shown on passport)		
First Name (as shown on passport)		
Title (e.g. Mr/Mrs/Miss/Other)		
Occupation		
Place of Birth		
Nationality		
Date of Birth (DD/MM/YY)		
Passport Number		
Date and Place of Issue (DD/MM/YY)		
Passport Expiry Date (DD/MM/YY)		
Home Address:		
Street		
Town		
County		
Postcode		
Country		
Home Telephone		
Mobile Telephone		
*Email Address		
Emergency Contact Next of Kin		
Emergency Contact Phone Number		

To add further passengers please use a separate sheet of paper, call our office and we will send you another booking form or download an additional booking form from our website www.enjoytravel.ie

You can use this booking form to book one or more holidays at the same time. Please indicate below which holidays you are booking. A deposit is required for each holiday you wish to book.

St Patricks Festival Costa del Salsa Fleadh Ibiza Enniscrone
 Fleadh Portugal Nile Cruise Llandudno Christmas and New Year

Complete for St Patricks Festival 2010 (9th-19th March) No. of Nights

Room Single Twin Triple

We will collect you from the airport if you arrive/depart on the scheduled transfer days (9th and 19th March). Please let us know your flight details:

Flight No	<input type="text"/>	Outbound Airport	<input type="text"/>	Departure Time	<input type="text"/>	Arrival time	<input type="text"/>
Flight No	<input type="text"/>	Return Airport	<input type="text" value="Malaga"/>	Departure Time	<input type="text"/>	Arrival time	<input type="text"/>

Complete for Costa del Salsa 2010 (5th-11th April)

Room Single Twin Triple

We will collect you from the airport if you arrive/depart on the scheduled transfer days (5th and 11th April). Please let us know your flight details:

Flight No	<input type="text"/>	Outbound Airport	<input type="text"/>	Departure Time	<input type="text"/>	Arrival time	<input type="text"/>
Flight No	<input type="text"/>	Return Airport	<input type="text" value="Malaga"/>	Departure Time	<input type="text"/>	Arrival time	<input type="text"/>

Complete for Ibiza 2010 (22nd April-1st May) (Shannon/Knock may operate as one aircraft and may involve coach transfers) (Manchester/Birmingham may operate as one aircraft and may involve coach transfers)

Preferred departure airport: (Write 1 for first choice and 2 for second choice)

Dublin Knock Shannon Manchester Birmingham Gatwick

Preferred Hotel Seaview Aura (tick as appropriate)

Room Single Twin Triple (third bed will be sofa bed or similar in triple rooms)

Please indicate preferred room number if known (Room requests cannot be guaranteed, but we will make every effort to oblige)

ROOM NUMBER 1ST CHOICE 2ND CHOICE DON'T MIND

Complete for Enniscrone 2010 (13th-18th June)Room type Twin Triple

If you require transport arranging (flights, ferries, or coach), please indicate here and we will contact you to discuss the details.

Yes, please contact me to organise my travel arrangements No thanks, I will make my own travel arrangements **Complete for Llandudno Weekend 2010 (10th-13th September)**Room type: Standard Double Standard Twin Premier Double Premier Twin

If you require transport arranging (flights, ferries, or coach), please indicate here and we will contact you to discuss the details.

Yes, please contact me to discuss my travel arrangements No thanks, I will make my own travel arrangements **Complete for Portugal 2010 (7th-14th -21st October)****Preferred Hotel**Montechoro dinner bed and breakfast Vila Petra 4 star dinner bed and breakfast Vila Petra self catering (tick as appropriate)**Room**Single Twin Triple (third bed will be sofa bed or similar in triple rooms)**Preferred Departure and Duration**1st week 2 weeks 2nd week (tick as appropriate)We will transfer you from and to the airport if you arrive/depart on the scheduled transfer days (7th, 14th and 21st Oct). Please let us know your flight details:Flight No Outbound Airport Departure Time Arrival time Flight No Return Airport Departure Time Arrival time **Complete for Nile Cruise 2010 (22nd - 29th November)****Preferred Departure Airport**Manchester (£35 supplement)Gatwick **Please select cabin type**Upper Middle Lower **Complete for Christmas and New Year 2010-11 (23rd Dec-2nd Jan)**Which period are you booking for Christmas (5 days) New Year (5 days) Christmas and New Year (10 days) (tick as appropriate)Room Single Twin Triple We will collect you from the airport if you arrive/depart on the scheduled transfer days (23rd, 28th Dec and 2nd Jan). Please let us know your flight details:Flight No Outbound Airport Departure Time Arrival time Flight No Return Airport Departure Time Arrival time **Declaration**

All the named persons are fit to travel and are not travelling contrary to medical advice. All pre-existing medical conditions must be declared to the insurance company.

N.B. If there is a change in the general health of any of the above named, medical advice should be sought before taking the proposed holiday. A medical certificate may be requested.

On behalf of the persons named above, whose authority I have to sign this agreement, I have read and agree to the terms and conditions of booking stated in the Fair Trade Charter.

Final Balance is due 10 weeks prior to departure

Name (please print)**Signature****Date**

This booking form is a request for your holiday. No contract exists until you have received a booking confirmation from Enjoy Travel. Please return completed booking form to Enjoy Travel, Suite 21, Blackburn Enterprise Centre, Furthergate, Blackburn, BB1 3HQ, Lancashire, UK.

Insurance

If you do not wish to take out Enjoy Travel Holiday Insurance you must provide FULL details of your current holiday insurance cover. You MUST contact the Health Check line to declare pre-existing conditions within two weeks of issue.

Please tick if you **DO NOT** wish to take out Enjoy Travel insurance**Alternative Cover is provided by:**

Insurance Company: _____

24 hour emergency tel. no: _____

Policy No: _____

Payment Details

Non refundable deposit

£

€

Insurance Premium (if applicable)

£

€

Total Deposit and Premium

£

€

Deposit Required £200 / €200 per person / per event booked

Special Requests: (e.g. dietary requirements / wheelchair assistance/ special transfer requirements)