Summerhill Apartments

Booking Form

(Please return this form with payment required)

J. LINAKER						
SUMMERHILL APARTMENTS						
4 Culver Road, Shanklin						
Isle of Wight, PO37 6ER						
Telephone: (01983) 862576						
E-mail: jean@summerhillapts.co.uk						
Web: www.summerhillapts.co.uk						
V A T No. 846 7955 67						

A.	HIRER'S NAME: Mr./Mrs./Miss					
В.	ADDRESS:					
	Post Code:					
	Home Tel:			E-Mail:		
C.	PLEASE LIST ALL MEMBERS OF YOUR PARTY, (including yourself)					
	Title	Initials	Surname		Age (*)	
*) /	Age if under	18 at time of arriva	l			
).	APARTMENT NAME:					
	ARRIVAL DATE:			DEP	DEPARTURE DATE:	
	PAYMENT: (Cost of accommodation per week £)					
	Additional Week, (different charge periods may apply)					
			Total Co	st:	£	
	1/3 DEPOSIT, due at booking: £					
		BALANCE, due 30 d	days prior to arriv	al:	£	
	KINDLY MAKE CHEQUES PAYABLE TO J LINAKER				ABLE TO J LINAKER**	
i.	DECLARATION: I agree and hereby accept on behalf of myself and all named personant that this booking is made in accordance with the booking conditions available on the website and in the brochure.					
	SIGNATU	RE		. DAT	TE	
1.	Would vou	ı mind letting us kno	w how you found	us?		