Booking Form

Please complete all relevant sections using Block capitals

Seaward's Of Harrogate 01423 881414

Contact Details (all correspondence will be sent here)					0	f Harroga
Name	••••••	•••••			0142	3 88141
Address				Please Select Day Trip	Holiday (9
	······	•••••		Departure date	7th August	2024
Postcode	······			Tour / Day Title	KYNREN	
Email	•••••••••••••••••••••••••••••••••••••••			Emergency contact	t details	
Telephone	••••••	••••••		Name		•••••
Mobile				Telephone		
Passenger Name	Date of Birth	Room Type (Holiday's Only) Single / Double / Twin	Membership Of (Please Tick)	Pick up point	Special requests of dietary requirement	
2 14		O O O S / D / T	OOO NT / EH / RHS			
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		O O O s / D / T	OOO NT / EH / RHS			
	Particular and the second seco	O O O S / D / T	OOO NT / EH / RHS			
Special A deposit of C50 per person				endeavour to meet	these.	

A deposit of £50 per person for holidays and payment in full for day trips to be made with this booking form, payment can either be made via cheque made payable to SEAWARD'S OF HARROGATE or direct via BACS.

BACS details

Account Name SEAWARD'S OF HARROGATE HOLIDAYS Sort code 53-50-2	1 Account number 58322981
Diagon transport No. 17 / Day 1 11 C	

Please use your Name and Tour / Day trip title as reference

I have enclosed/made a payment by Cheque or BACS to the value of

 $\mathcal L$ for this booking.

Insurance Disclaimer: Seaward's of Harrogate do not offer holiday insurance. By signing this form you agree to provide your own insurance cover and therefore agree to indemnify Seaward's of Harrogate against any expense whatsoever incurred by any passenger named, not having adequate protection at the time of booking.

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Signature	Date	
	Date	