BOOKING FORM



P.O. Box Q788, QVB NSW 1230 Tel: 61 2 9966 4545

TITLE		INITIALS	SURNAM	1 =	Tel: 61 2 9966 4545 TELEPHONE
		INITIALO	SUNIVAIN	/IL	
				32	Home
ADDRESS					Work
ADDITEGO					Fax
					Email
					Liliali
					HOW DID YOU HEAR OF US
					Newspaper, magazine,Web site, referral
*					
on the same of the	man v	· · · · · · · · · · · · · · · · · · ·	POSTCOD	E	
		OF THE PART'			LINEN If ordering linen or if linen is included in the rental price, please specify your requirements taking into account the bedroom arrangements of the house. DOUBLES SINGLES
TITLE	INITIALS	7	URNAME	AGE	DOUBLES SINGLES
HILE	INTIALS	3	OTAMAINE	AGE	OTHER SERVICES
					Please list additional services if available.
					COT
					CLEANING DURING HOLIDAY
					OTHER
					DEPOSIT PAYMENT
					If you are booking within 9 weeks of the start of you
			1		holiday then the full amount is due at time of booking
T.1.1		D			Please make cheque payable to
lotai	Number of	People Includir	ig babies ====>		
PROPERTY 1					TUSCAN ENTERPRISES (AUST) As agents for Provence Houses.
REFERENCE No.		ARRIVAL DATE			1
		DEPARTURE DATE			DEPOSIT
PROPER	TY 2	DEL ANTONE DATE			PAYMENT
REFERENCE No.		ARRIVAL DATE			40% OF TOTAL HOUSE RENTAL COST
NEI ENEROL NO.		DEPARTURE DATE			40% OF TOTAL HOUSE NEWTAL GOST
(Arrival Time	e hetween 16	3.00 &18.00)			
		AILS (1% fee is	applicable)		
OKEDII (AND DE I	AILO (1% lee IS	applicable)		
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Cardholde	er's Signatu	ire C	ardholder's Name		Cardholder's address
		1			- Commence
		Ex	piry Date		
DECLARA	TION				
DECLARA	ATION			- Wall was a second	
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			d agree that this booki ich I have read. I agre		SIGNATURE
			s due and payable in a		DATE
the Booking	conditions.		L-1/3-11-3 11.		