HIDDEN GREECE BOOKING FORM 2017

Please complete and sign this form and send it or fax it to:
Hidden Greece, 10 Upper Square, Old Isleworth TW7 7BJ | Tel: 020 8758 4707 | Fax: 020 8568 8330

Please book the following travellers on the holiday outlined

Note: if you used our Booking Enquiry Form and have already sent us your address & phone details you may (if you insist!) omit them from this form.

	Title	First Name	Surname	Address	Phones Home/Work/Mob	Age†
	Me	.....	.....	.....	.....	
			e-mail address:			
2		.....	.....	.....	.....	
3		.....	.....	.....	.....	
4		.....	.....	.....	.....	
5		.....	.....	.....	.....	
6		.....	.....	.....	.....	
7		.....	.....	.....	.....	
8		.....	.....	.....	.....	

† Age (on date of return flight) must be given for infants and children; an age indication (e.g. 40-50) for other travellers would be appreciated.

Please provide details of your holiday insurance in case of emergency:

Insurer's name: _____ **Policy no:** _____ **Insurer's 24-hour contact no:** _____

If you used our Holiday Booking Enquiry to set the ball rolling, please enter only the basic details of the holiday as confirmed to you by phone/e-mail in the relevant 1st choice boxes.
This form is intended mainly to comply with the legal requirement for there to be a written agreement between us.

Departure date	1st choice:		2nd choice:		Vegetarian meals on flight?
Departure airport	1st choice:		2nd choice:		Yes ☐ How many: ☐
	1st stay	2nd stay	3rd stay	4th stay	5th stay
Resort					
Accommodation					
Board basis					
Room type(s)					
No. of days requested					
Car hire & no. of days					

PAYMENT I enclose: ☐ deposit of £250 p.p. ☐ Full payment of £

☐ Cheque enclosed / Please charge ☐ Visa ☐ Mastercard ☐ Maestro (issue no.) **Total £** _____

Card number ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ Expiry date: ____/____ Signed:

Name & address on card if NOT the same as lead person: _____

☐ Please charge the balance of holiday payment to the same card when it becomes due. ☐ I will send the balance payment by cheque 2 months before departure

**2% handling fee for payment by credit card; no charge for debit card.*

DECLARATION: I confirm that I am over 18 and have read and accept on behalf of all those listed above, your conditions as set out in the website section headed "Boring Details".

Signed: _____ Dated: ____/____/____