



# Booking Form No. 1

Wherever possible, please complete using blank ink and block capital letters.

Please provide details of all customers on this booking

| Surname | Title | Initial | Address | Tel. |
|---------|-------|---------|---------|------|
| 1.      |       |         |         |      |
| 2.      |       |         |         |      |
| 3.      |       |         |         |      |
| 4.      |       |         |         |      |

Holiday Destination

Holiday Date

No. of Nights

Hotel/Guest House

Room Type  
 Single    Double    Twin

Special Requirements

**Insurance:** Please read information concerning insurance on page 29.

### Payment Details

Deposit of £90 per person

OR

Full payment (if less than 8 weeks to your holiday)

Optional payment to  
 'The Lake District Tourism & Conservation Partnership'

\*Amend or delete as applicable

TOTAL

Please make cheques payable to Mountain Goat Ltd or charge my VISA / MASTERCARD / DEBIT CARD / SWITCH

Expiry Date

Issue No. (Switch only)

Last 3 digits on signature strip

Declaration: On behalf of above persons, I accept the Mountain Goat Holidays Booking Conditions.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_