

Booking form J.S. BRAYSHAW (CARAVANS) LTD
 THE YORKSHIRE HUSSAR INN HOLIDAY CARAVAN PARK
 MARKINGTON, NR. HARROGATE. HG3 3NR.

HOLIDAY BOOKING FORM. V.A.T.NO.180 4798 39 TEL: 01765 677327/677715
 HAVE YOU BEEN BEFORE – YES / NO. HOW DID YOU HEAR ABOUT US? _____

NAME. _____ No. of Adults. _____ No. of Children _____

ADDRESS _____

COUNTRY _____ PASSPORT NO. _____

TEL NO: _____ CAR NO: _____

PLEASE RESERVE ME THE _____ CARAVAN FOR _____ WEEKS
 DATE - FROM 1 P.M. SATURDAY ____ / ____ /20 . TO 10 A.M. SATURDAY ____ / ____ /20

TOTAL PRICE INCLUDING VAT,GAS & ELECTRIC £ _____
 PLUS EXTRA FOR EACH DOG AT £12 PER WEEK. (AND OTHER PETS) £ _____

“Last Minute Short Lets” to be paid in full TOTAL COST £ _____
 LESS DEPOSIT OF £100 PER WEEK. (Non-Returnable). £ _____

BALANCE TO PAY 2 WEEKS BEFORE ARRIVAL - £ _____
 BY CASH OR CHEQUE ONLY. =====

HIRERS SIGNATURE: _____ DATE OF DEPOSIT _____

NOTE: Hirers to provide their own sheets pillowcases, towel, tea-towels, table linen and rubber sheets for small children. We provide two blankets, duvets and one pillow per bed.

PLEASE FILL IN:- RECEIPT FOR BALANCE - V.A.T.NO.180 4798 39

NAME _____ TOTAL COST £ _____
 LESS DEPOSIT £ _____

ADDRESS _____

TO PAY 2 WEEKS BEFORE £ _____
 THE HOLIDAY.

PAYMENTS BY CHEQUE OR CASH ONLY.

DATE OF RECEIPT _____ NAME OF CARAVAN _____

RECEIVED WITH THANKS.....J.S.BRAYSHAW (CARAVANS) LTD.

PLEASE FILL IN. RECEIPT FOR DEPOSIT - V.A.T.NO.180 4798 39
 FOR _____ WEEKS COMMENCING SATURDAY _____ TO _____ /2011

NAME _____ NAME OF CARAVAN _____
 DATE OF PAYING DEPOSIT _____

ADDRESS _____ AMOUNT OF DEPOSIT PAID £ _____
 BALANCE DUE £ _____

All Payments by Cheque or Cash Only – Received with Thanks.....Date.....
CHEQUES PAYABLE TO:- J.S.BRAYSHAW (CARAVANS) LTD. - SORRY NO CREDIT CARDS