Cathar Country Tours



Booking Form

Tour.		
Scheduled One-Week Tour		(please tick relevant box)
or Private []-day Tour		(please insert number of days)
From []	To []	(please insert dates in format dd/mmm/yy)
Attendees		
Number of tour attendees [] (details on next page)	(please insert number of attendees)
Booking		
I, [], wish to book t	his tour. (please insert name)
I have read and understood the	e terms and conditions at	
www.catharcountry.info/tour	terms.htm	(please tick box)
Cost		
The total cost as agreed is [] Euros	(please insert amount)
The deposit, now due, is: 40%	= [Euros.	(please insert amount)
Contact Details		(please insert contact details below)
Address for correspondence:		
	Signed	
	Date	
	e-mail	
	Tel: Home	
	Tel: Work	
	Tel: Mobile	
Special Dietary Require	ements	
Please describe any special die	tary requirements or intolerar	nce's in your party. (if any)

Please print both pages of this form, complete it and either

- (a) Scan it and email the scan to tours@catharcountry.info or
- (b) Mail it to: Cathar Castle Tours, Chateau St-Ferriol, 1500 St-Ferriol, France.



Attendees

(Please fill in details for as many as applicable, and bracket together those who wish to share a room)
(Please print off duplicate pages if your party is larger than 6)

Surname, Forename, + Age (If under 18):						
Nationality& Passport No:						
Insurance Company:						
Travel Policy Number	••					
Single room	or, Double room		or, Twin room			
Surname, Forename, + Age (If under 18):						
Nationality& Passport	No:					
Insurance Company:						
Travel Policy Number	••					
Single room	or, Double room		or, Twin room			
Surname, Forename, + Age (If under 18):						
Nationality& Passport	No:					
Insurance Company:						
Travel Policy Number	••					
Single room	or, Double room		or, Twin room			
Surname, Forename, -	<u> </u>					
Nationality& Passport	No:					
Insurance Company:						
Travel Policy Number	••					
Single room	or, Double room		or, Twin room			
Surname, Forename, + Age (If under 18):						
Nationality& Passport	No:					
Insurance Company:						
Travel Policy Number	••					
Single room	or, Double room		or, Twin room			
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Nationality& Passport No:						
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Single room	or, Double room		or, Twin room			