

Robson's Retreat Booking Form

NAME:	ADDRESS:	
		POSTCODE:
TEL (Day):	TEL (Eve):	FAX:
DATE from:	DATE to:	No. NIGHTS:

PERSONS OCCUPYING THE VILLA:

TITLE	FULL NAME	AGE (if under 21)
	Total Villa Hire	
	Pool/Spa Heating (Recommended Oct – Apr)	
	Security Deposit to be refunded after stay	
	Sat-Nav (UK guests only and subject to availability). YES/NO	
	Grand Total	
	Less Booking Deposit	
	Balance due 8 weeks before arrival	
	Amount Enclosed	

All prices are **INCLUSIVE** of Florida Sales taxes and after stay clean.
 Bookings are not confirmed until deposit has been paid.

I agree to pay the balance 8 weeks prior to Arrival. I accept and have read the terms & conditions as stated on behalf of myself and my party. I am over 21 years of age.

Signed _____ **Dated** _____
 UK Guests: Please send any cheques to A Robson, 15 Bishop Marshall Way, Middleton, Manchester. M24 5NE

US Guests: Please send any checks to Florida Leisure Vacation Homes, 4620 Cumbrian Lakes Drive, Kissimmee, FL, 34746