## MOORLAND HALL CONFIRMATION BOOKING FORM

Child's Name.		Sex Date of Birth
Name of Paren	t/Guardian	
Address		
Home Phone N	Vo Dayti	ime Phone No Fax/Email No
Date of Arrival	1	Time of Arrival
Arrival Airport	t	Terminal
Flight No		Date of Departure
Time of Depart	ture	Flight No.
Checking - in a	at airport on day of departure	-£ 60 per person, unless meeting parents at airport.
when b	booking flights please arrar	is <u>4 hours</u> drive from Heathrow, therefore nge for your child to <u>arrive in the morning</u> of the <u>hrs</u> on the Saturday of departure.
_		e
Any Special di	etary or medical requirements	s?
How did you h	ear of us?	
I have paid 10%	% per head non-returnable dep	posit note any reference:
Ū	Account Name: Mo	0 – 146 Armada Way, Plymouth, Devon, PL1 1JB oorland Hall Ltd 58 1013 6761 61 <b>SWIFT BIC</b> BUKBGB 22
		used in our brochure. Please confirm if you are agreeable to Yes No
I have read the	booking conditions and agree	e to abide by them
Signed		Date
	his form together with the dep	posit to:
Moorland Hall Brentor Road		none: +44 (0) 1822 810466
Mary Tavy TAVISTOCK West Devon PI		: info@moorlandhall.co.uk www.moorlandhall.co.uk
WEST DEVOUEL	LIJ JE I WEN:	w w w.iiiuuiaii.cu.uk

Director: Jo Farrington Company Number: 8498811