

Argentine Tango Booking form

Name						
	Post Code					
	Mobile					
Email						
Date	No in room	Room Type	Sea View (Yes/No)	Package Price INC Supplements	Total	
example 5 th – 7 th April 2024	2	Double	no	£228	£456.00	
CDECIAL DECLIECTO		II C I'C I'				
SPECIAL REQUESTS (e. Please note requests are				nts, dining with friends	5)	
Name and address to ac	_	_				
Telephone				Postcode		
Email						
Balance of payment is to extra charge, however th Cancellations made with first night of accommod In case of unexpected ca In case of illness or any	ne deposit n less than ation and t ancellation,	is non-refund 7 days' notice towards the h , you are reco r	able. e will be charge ! ost fees. mmended to tak !	£100 per person, to co	ver the costs of the	
Signed		Dated	j			
METHOD OF PAYME required at the time of					per person is	
Please find enclosed a Please debit £below:- PLEASE DO NO POST ONLY!	from my OT SCAN	/ Mastercard AND EMAIL	/Visa/Switch ca THIS FORM WIT	ard (please circle) on	the number given	
Card Number:			3 Diç	git Security Code		
Issue Number (Switch	only)	Start Date		Expiry Date		
Name as it appears on	the card					
Once your card details	have bee		on our system, y booking form	our card details will	be destroyed from	