ERINACEUS DESTINATION PARADISE - Booking Form

Your E-Mail:	Date From
Title	Date To
First Name	Number of weeks
Last Name	Other services required: ☐ Maid
Occupation	☐ Car
Home Tel No.	☐ Helicopter Service
Day Tel. No.	If maid, how often:
Mobile No.	
Home Address	Other requests:
Postcode	

Payment Details	**Other Occupant Details**
Deposit	Surname
Full Amount if within 9 weeks of travel	Contact Number
Total	E-Mail Address
Card Type	Home Address
Card Numer	Postcode
Expiry	

Other passengers (age only required if under 15 years)

First Name	Last Name	Age
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

Other Comments:

I can confirm that I have read the Booking Conditions

Signature _____ Date _____

Please mail to office@kinabeach.info or fax to ++43 732 6868-61230