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Pilgrimage to Lourdes
09 July – 15 July 2014

Booking Form

Please complete all the required fields in CAPITAL LETTERS and post or email to the relevant address as above

	Traveller 1	**Traveller 2**	**Traveller 3**
Salutation *(select)*	Mr. / Mrs. / other ____	Mr. / Mrs. / other ____	Mr. / Mrs. / other ____
First Name *(as on passport)*			
Surname *(as on passport)*			
Date of birth *(ONLY for children or if you require an insurance quote – dd/mm/yyyy)*			
Telephone number			
Mobile number			
e-mail address			
Special requirements			

Home address	

Room *(tick one)* Single room ☐ Double room ☐ Twin room*☐ Triple room*☐
* Please indicate the name of the person(s) you are sharing with if you are completing separate Booking Forms: _____
Please tick if you wish to have a late check-out and keep your room until 00:30hrs on Tuesday 15 July 2014 at € 45.00 per person ☐

Please send me a quote for return home address - Malta International Airport transfers *(tick if applicable)* ☐
Please send me an application for a travel insurance quote *(tick if applicable)* ☐
Please send me details of any future tours *(tick any)* by e-mail ☐ by post ☐

I attach _____ bank cheque number _____ for the amount of EURO € _____
(minimum € 200 per person) payable to **discoverAccess Malta Limited** as a deposit against the full price.
(Kindly contact us if you wish to pay other than by cheque.)

I understand that once my place is confirmed by V. Tabone Travel, this deposit is non-refundable and it may only be refunded if my place is taken up by another traveller not on the original list of confirmed travellers. I hereby confirm that the information above is correct.

_____ _____
Signature Date