## **BOOKING FORM**

NAME ADDRESS		
	TEL. No.	
I have stayed at Gaer Co I first heard of Gaer Co (Name of Friend; Publ	ottages from:-	
COTTAGE CHOICE		
DATES REQUIRED	FromTo	
PARTY DETAILS	AdultsPets	
SPECIAL REQUIREM	Children (under 18)Ages  MENTS Cot [ ] High Chair [ ] Stair Gate [ ]  Hoist [ ] Bed Sides [ ] Other [ ]	
RENTALPETS @ £25 eacl	£ h <u>£</u>	
TOTAL DEPOSIT 1/3rd	£ £	
BALANCE DUE	<u>£</u>	
I enclose a cheque for	£ made payable to Gaer Cottages.	
Please charge my Deb	oit/Credit card, registered at the above, with £	
Card No		
Start date	Expiry Date 3 digit security code	
I am 18 years of age of I have read and accept I have Holiday Insurar	t the Booking Conditions.	
SIGNATURE		
DATE		
SEND TO:- Gaer Cott	tages, Cribyn, Lampeter, Ceredigion, SA48 7LZ.	
Date Received		