



**Halsbury Travel Ltd.**  
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## BOOKING FORM: AIR TOURS

NAME OF GROUP:		
ADDRESS: _____ _____ POSTCODE _____		
TELEPHONE:	FAX:	email:
GROUP LEADER'S NAME:		(Mr / Mrs / Miss / Ms)
HOME ADDRESS: _____ _____ POSTCODE _____		
Home Phone number:	mobile:	Home email:

Home contacts for emergency use only. You may like us to contact you with offers regarding similar trips. Please tick here if you do not wish us to do so

DESTINATION / RESORT:				UK Coach transfers required:			
No. NIGHTS in Resort:				<input type="checkbox"/> Yes <input type="checkbox"/> No			
DATE OF DEPARTURE:		DEPARTURE AIRPORT:		DATE OF RETURN:		ARRIVAL AIRPORT:	
No nights in accom.:		MEALS BASIS: <input type="checkbox"/> B&B <input type="checkbox"/> H/B <input type="checkbox"/> F/B Full Board = B&B + packed lunch + evening meal Half Board = B&B + evening meal					

Average age of students:	Number of passengers	Cost per passenger	<b>Places to visit:</b> Please tell us how you would like to spend your day and the places you would like to visit during your trip. If you would like us to book any visit or meals for your group please tell us at what time you would like them booked.
PAYING PASSENGERS UNDER 18		£	
PAYING PASSENGERS 18 or OVER		£	
FREE STAFF PLACES			
OTHER PASSENGERS/SUPPLEMENTS		<b>Details:</b>	
<b>TOTAL</b>			

I have read the booking conditions and understand that they govern the contract between my party and Halsbury Travel Ltd and confirm that as party leader I am authorised to sign on behalf of the others in my group.  
 I understand that on receipt of the initial deposit Halsbury Travel will issue Travel & Medical Insurance for my group if this is included in the price quoted (see quotation letter for details).

I enclose the official passenger list and an initial deposit of £ \_\_\_\_\_ per paying passenger (£ \_\_\_\_\_ Total) to secure the above mentioned places.

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

