



Registered Charity
502341

ACCOMMODATION BOOKING FORM

Booking Ref:

Lodge:

Cottage:

Please Note: Verbal bookings MUST be confirmed within 14 days with this form and your deposit.

Name of Organisation: _____

Name of Party Leader: _____

Correspondence Address: _____

Postcode: _____

Telephone Number: Day: _____ Night: _____

Total Number in Party: _____ No of over 18's _____

Has the leader used the Lodge / Cottage before YES/NO

Dates of Stay From: _____ To: _____

Approximate Times: Arrival _____ Departure _____

I enclose £ _____ Booking Fee

Please make all cheques payable to "Gearstones Lodge Management Committee"

**I have read the Gearstones Lodge Info-Pack and accept the rules and conditions set out.
I agree to pay for any damages or breakages which occur during the visit.**

Signed (Party Leader) _____ Date _____

Office Use Only

Booking form and deposit received: _____

Confirmation returned to applicant: _____

Invoice sent to applicant: _____

Balance of account received: _____

Account Deposit _____

Balance _____

Total _____

Return To:

Mr G Nind
23 Vicarage Meadows
Mirfield
WF14 9JL

Notes: