



## Booking Form

Please complete on behalf of all the people in the group.

NAME \_\_\_\_\_ AGE \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TEL \_\_\_\_\_ MOB \_\_\_\_\_

EMAIL \_\_\_\_\_

### Payment details

Please book my holiday for myself and all other persons named on the form. I enclose payment as follows:

Deposit ( non refundable ) for \_\_\_\_\_ persons @ £100.00 pp    £ \_\_\_\_\_  
Balance due 8 weeks prior to departure

Full Payment £ \_\_\_\_\_ Signed \_\_\_\_\_

Please make cheque payable to “Chalet Peloton” and send to:  
CYCLEADDICTION, The Cottage, Fontridge Lane, Etchingam, East Sussex TN19 7DD  
Tel: +33 607979736

Alternatively credit our account online: Sort code: 30 00 08 Account number: 04248823

### Tour / Sportive / Raid details

Arrival date \_\_\_\_\_ Departure date \_\_\_\_\_

Accommodation \_\_\_\_\_

No of nights \_\_\_\_\_ Flight information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

GROUP INFORMATION

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_

SPECIAL REQUESTS if any

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MEDICAL CONDITIONS if any

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_