



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
