Couthern	BOOKING FORM		
Southern	Southern Sounds is a trading style of Golf Escapes Limited		
ounus	ST ANDREWS HOUSE, CINDER HILL, HORSTED KEYNES, SUSSEX, RH17 7BA		
	TEL: 07986 001735		
	www.southern-sounds.co.uk info@southern-sounds.co.uk		
let the good times roll		into@southern-sout	Ius.co.uk
I / We wish to book the following French Quarter Festival Tour to New Orleans.			
Departs Monday 13 <sup>th</sup> April 2020 returns Wednesday 22 <sup>nd</sup> April 2020 (arrives UK Thursday 23 <sup>rd</sup> April 2020)			
PERSONAL DETAILS - please PRINT clearly. Ensure that ALL names given correspond with those exactly as per your passport(s) as any changes after confirmation may incur a penalty.			
		1 <sup>st</sup> Traveller	2 <sup>nd</sup> Traveller
Title (not on passport but required by the air	line)		
All First Names (as shown on your passport)			
Surname (as shown on your passport)			
By what name would you like to be known - this shown on your tour badge	will be		
Date of Birth			
Nationality & Passport Number			
Passport Expiry date			
ESTA No. – preferably arranged prior to booking			
ESTA Expiry date			
<b>TRAVEL INSURANCE</b> – it is strongly recommended that you have travel insurance in place, preferably when booking or shortly thereafter. Please ensure that you arrange adequate cover including: inter alia, cancellation & curtailment, medical expenses, repatriation, money and personal belongings and advise us of your policy details.			
FLIGHTS – please tick your preferred airport and seating.			
Heathrow       Other (please call to discuss)       Window       Next / Middle       Aisle			
NB. Whilst seating preferences are requested, allocation is not guaranteed and is at the discretion of the airline. Charges may occur for pre-seating before check-in.			
DIETARY, DISABILITY, MEDICAL OR SPECIAL REQUIREMENTS Please advise us if you have special needs that we should be aware of:			
ACCOMMODATION – please indicate your room preference			
□ Double (King room) □ Twin room □ Single □ Triple share □ Please find me a rooming companion.			
Additional information			
Do you play an instrument, if so what? and will you be taking it with you? Yes No PAYMENT - Please tick your payment method			
I enclose deposit of £400 per person x £			
By Internet Banking to Barclays Bank, S/C 20-07-82, A/C No. 90171034, A/C Name: Golf Escapes Ltd Please quote reference C11210 AND YOUR SURNAME when submitting payment.			
Cheques should be made payable to Golf Escapes Ltd.			
Debit cards are accepted.			
Card Number			
Card Type: Security Code: Security Code: Issue No (if applicable)			
Name of cardholder as shown on the card:			
BOOKING CONDITIONS I accept these conditions on behalf of everyone on this form.			
Signed	Date		
Name	Home Telephone		
Address	E mail		
Post Code	UK Emergency Contact Name and Telephone Number		
Note: If exchange rates change substantially, we reserve the right to re-invoice using the new rate; full payment at the time of booking guarantees the costs. However, if Government taxes or fuel			
surcharges increase we will send you an amended invoice for the difference. We reserve the right to exclude from group activities, or in serious cases, send home anyone who places any member of the group in danger because of his/her actions or who causes problems or			
severe discord amongst the group. Any health problems either mental or physical must be disclosed to us (in confidence) by return. If you feel unable to accept any of these conditions, we must			