

# WINTER BOOKING FORM



Holiday Start Date:		Holiday End Date:	
<b>1st Floor Apartment</b> Total Number in Party:		No. 2-12 year olds:	No. under 2's:

**Catered Chalet**

Sole Occupancy  Book by the Room

Total No. in Party	
No. of Adults	
No. 13-15 year olds	
No. 2-12 year olds	
No. under 2 year olds:	

**I would like:**

- To reserve in-house ski and boot hire
- To reserve ski instruction by Mike Onions
- Details on Ski and Snowboard School
- Details on mountain guiding (Examples include:- Ski Safari: Tchiertschen-Lenzerheide-Arosa/Davos-Arosa/Arosa-Chur)
- To discuss in-chalet childcare
- To reserve this number of car parking spaces: \_\_\_\_\_

Leader Name:

Address:

Post Code:

Home Number:  Fax Number:

Work Number:  Mobile Number:

Email address:

Method of Travel: Air  Car  Train  Other

Known Travel Details:

To receive your holiday quote, please call 01707 251696, email or, alternatively, view our web-site and fill-in your requirements on our quote form.

Holiday Price CHF		Deposit of 10%		Full payment if less than 10 weeks prior to holiday	
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**Method of Payment** Direct Transfer CHF  GBP  Euro  *Transfer details on back page.* Card

If by card: type? Visa  Mastercard  Maestro  Name on card

Card number  Date of Expiry  CV Code

*Cards are debited in Swiss Francs, plus 3.5% credit card charge.*

**INSURANCE** Please give details of your cover below and sign the insurance indemnity below.

Insurance Company Contact No.	Policy Number:	24 Hour Contact Number
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Insurance indemnity:

I hereby undertake on behalf of myself and all members of my party:

- (i) to arrange holiday insurance which provides sufficient cover.
- (ii) not to hold Snowy Pockets responsible for any cost incurred by my party due to my failure to take out adequate insurance.
- (iii) to indemnify Snowy Pockets for any cost incurred by myself and all party members due to my failure to take out adequate insurance cover.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Declaration**

I agree to the conditions and liabilities set out in the booking conditions on [www.snowypockets.com](http://www.snowypockets.com) (or contact us for a copy to be sent). I am over 18 years and declare I am authorized by the person(s) named on this form to effect this booking and accept liability and conditions on his/her/their behalf, and any other person I may subsequently ask you to book in my name. I agree to pay the balance no later than ten weeks prior to the departure date otherwise holiday dates reserved maybe freed to take other bookings at the loss of my deposit.

Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE POST THIS FORM TO: SNOWY POCKETS • CHALET RUNCA • WETTERWEIDE • 7050 AROSA • SWITZERLAND**  
 Tel/Fax: +41 (0) 813 565257 • UK Tel: 01707 251696 • Mobile: +41 (0) 798 333608 • [www.snowypockets.com](http://www.snowypockets.com) • Email: [info@snowypockets.com](mailto:info@snowypockets.com)