



Booking Form

How to complete the booking form

Please complete all parts of the booking form.

1. Lead name and contact details: this is the sole person in the booking party that we will take instruction from or enter into dialogue or correspondence with in respect of any booking arrangements or subsequent issues relating to the booking. All documentation will be sent to the lead name's address.

3. All clients in the party must be entered and must be insured against holiday risks.

7. Deposit - 25% of full cost of holiday is required unless within 8 weeks of departure, in which case full payment is due.

Security deposit - Clients are required to pledge a security deposit of £500 against any damage in the Masseria. This can be pledged by credit card. See booking form 7.

9. Declaration - this must be signed by the lead member of the party intending to travel and who is over 18 years of age.

Please complete this form and email back to **info@masseriadellazingara.com** or print out and send to:
 Masseria della Zingara Ltd.
 c/o Andrew Cross & Co. (Accountants)
 Plaza Buildings
 102 Lee High Road
 London SE13 5PT

1) LEAD NAME

Title _____ Initial _____ Surname _____

Address _____

Town/City _____ Postcode _____

Email _____ Daytime Tel: _____ Evening Tel: _____

Emergency Mobile of Lead Name _____

Contact details of Next of Kin _____

2) HOLIDAY DETAILS

Option 1: Rental of main house only

Option 2: Rental of main house and Casetta or
 Rental of main house and Annexe studio apt

Option 3: Rental of entire Masseria della Zingara

Option 4: Rental of 4 bedroom apartment Masseria della Zingara
 Only possible during certain times of the year

Dates from: _____ To _____ Cost _____

3) ACCOMPANYING CLIENT(S) DETAILS

No	Title	Initials	Name.	Date of Birth if under 18 at date of travel
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____

Please include Lead Name. If names of party are currently unknown, please detail them as TBA. Infants (0-2) must also be included. All names must be advised no later than 8 weeks prior to departure.

4) TRAVEL PLANS
Please advise us of your travel details in order to comply with tenancy times and so that keys etc can be made available.

5) ADDITIONAL SERVICES YOU MIGHT REQUIRE

Please advise us about:-

- Private local chef specialising in Pugliese food and wines can be arranged for dinners, parties.
- Welcome shopping basket (starter hamper contains the basics only)
- Private taxi transfer from and return to airport
- Breakfast service
- English speaking local guide
- Daily maid service

6) INSURANCE

Insurance is a requirement. We seek a declaration below from the Lead Name that insurance has been obtained to cover the entire party and that the owners are absolved from all possible liabilities arising from the decision to take out that cover.

Insurance Co: _____ Policy No: _____

Signature:

7) REMITTANCE (Deposits must be made on booking)

- a) Payable on Booking – deposit of 25%
 - b) If within 8 weeks of departure, full payment
 - c) Additional payments for other agreed services
- Total enclosed/attached _____

HOW TO PAY

- a) Credit/Debit card option to fill in details below
 - b) or pay by credit card on the phone to Jan King
 - c) alternatively by cheque payable to Masseria della Zingara Ltd.
 - d) make a direct bank transfer to: Masseria della Zingara Ltd
- Account Number: 23529916 Sort Code: 20-67-59
IBAN: GB28 BARC 2067 5923 5299 16 SWIFTBIC : BARCGB22

Damage and incidentals:

ALL CLIENTS MUST COMPLETE THEIR CREDIT/DEBIT CARD DETAILS AS THIS IS THE REQUIRED FORM OF PAYMENT FOR DAMAGES AND INCIDENTAL CHARGES EVEN IF PAYING YOUR HOLIDAY REMITTANCE BY CHEQUE.

Any damage to any part of the Masseria caused by the client is the responsibility of the client and signing and returning this form represents full acceptance of and agreement to be bound by these terms. Please be aware that you will be charged for the cost of repairs or replacement of any such damage which will be deducted from your credit/debit card.

CREDIT CARD Visa Mastercard Switch/Maestro

Card Number Switch Card Issue No:

Valid From : Expires:

Name on Card: _____ Last 3 digits on reverse of card

I give Masseria della Zingara Ltd authority to debit my credit or debit card as shown above:-

- a) Holiday deposit as shown
- b) Balance of holiday costs shown on invoice due 8 weeks before departure
- c) Damage/incidental charges in the event that these are incurred (you will be notified of any such charges).

8) I have read and agree to all the booking terms and conditions stated on the website

9) DECLARATION (signed by the Lead Name who must be over 18 years old)

The information in the Booking Form is correct to the best of my knowledge. I have read and understood the booking conditions and information detailed on the website and accept them on behalf of the persons listed in the party. I confirm that I am the lead member of the party travelling and that I accept the prices as quoted. I am over 18 years old.

Signature: Name (in block capitals) _____
Date: _____