



Booking Form.



Holiday Title				Ref No
	First Name (as on passport)	Surname	Date of birth	
Lead Name				Passport No Start date Expiry date
2 nd name				Passport No Start date Expiry date
Address:				
			Post Code	
Tel No:		Mobile No:		
email:				
Please give details of your recent cycling and touring experience				
please give details of any medical conditions and medication taken				
Emergency contact details				
Tel No:		Name:		Relationship to you
Accommodation: please circle				
Single room		Twin room		Double
Type of bicycle: please circle				
Solo		Tandem		Electric bike
				recumbent 2 wheel/3 wheel
Diet please circle				
Vegetarian		Other		

By signing this booking form, you agree that you have read, understood and agreed in full the Cycling Wth Us booking conditions

signed

print name

Email or post to: Cycling With Us The Nest Hambledon Road Denmead PO7 6QF