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## **BOOKING FORM**

Date:			
Name:			
Address:			
Cell no.:		e-mail:	
Phone:		Fax:	
Car registration:		Vat number :	
Date of arrival:		E.T.A:	
Date of departure:			
No. of nights:	No. of Adults:	Children	n:
Rate / Night Adults	= R	X	_ nights = R
Rate / night Children	= R	Х	_ nights = R
Deposit paid: into bank acco	ount:		R
Balance due:			R

## Please note:

- No refund of deposits unless cancelled >30 days before arrival.
- No refund for late arrivals or early departure.
- Credit card facilities available credit card, cash or direct deposit please.

"Guests and their visitors enter and use these premises at their own risk. Neither the owners nor their representatives or agents are liable for loss or damage to guests' or visitors' property, nor for the injury or death of any guests or visitors, whether or not such loss, damage, injury or death is as a result of the negligence of the owners and /or their representatives."

Date:	Signature:
1	Bank details

Bank: ABSA Type: CHEQUE.

Branch: GREYTOWN