

Italian Lakes Booking Form

PASSENGER NAME & DETAILS

Name _____ Group Name **Art Society Cranleigh & Friends**
 Address _____
 Email _____ Postcode _____
 Daytime Contact Number _____ Mobile No. _____
 Emergency Contact Name _____ Telephone No. _____

TOUR DETAILS

7 days / 6 nights' duration departing **Monday 5th October 2020**
 Return flights from London Gatwick to Milan *including reserved seating and 1 piece 23kg hold luggage.*
Monday 05.10.20 - Depart London Gatwick 09.00hrs – Arrive Milan Malpensa 12.05hrs
Sunday 11.10.20 - Depart Milan Malpensa 17.00hrs – Arrive London Gatwick 17.50hrs
 6 nights half board at the **3* Flora Hotel** - all ensuite rooms + portorage
 Included excursion package with entrances & guides as per our sample itinerary
 Local guide to accompany the group on excursion days + assistance for resort / airport transfers
 Price from **£999pp** -Twin / Double share
 Single supplement **£ 89pp** – maximum 15 rooms - Doubles for sole use
 Deposit (non-refundable/ non-transferable) **£ 200pp** - Balance due in full by the **07.08.20**
 Optional Travel Insurance **£45pp** – No upper age limit but conditions apply - *Includes Insurance Premium Tax (IPT) @ 20%.*
Simply Groups Ltd is an Appointed Representative of ITC Compliance Ltd who is Authorised and Regulated by the Financial Conduct Authority.

PAYMENT METHODS

CARD NUMBER

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No charges apply (AMEX not accepted)

VISA/MASTERCARD CREDIT/DEBIT EXPIRY DATE _____

Cheques need to be made payable to:
SIMPLY GROUPS CLIENT ACCOUNT
 For card payments SIMPLY GROUPS
 will contact you for your **3 DIGIT SECURITY NUMBER**
 For BACS Payments: Sort Code **20-11-88**
 Account Number: **43747417**
*(please quote your **Surname** and **ASCAN** as reference)*

PLEASE COMPLETE THIS SECTION INCLUDING THE NAMES OF ALL PASSENGERS

Title	First Name	Surname	Room type	ARTS Soc. Member	RHS Member	SG Insurance	Total Enclosed
PASSENGER 1 Mr__ Mrs__ Miss__ Ms__							
PASSENGER 2 Mr__ Mrs__ Miss__ Ms__							

SPECIAL REQUESTS, DIETARY MOBILITY & ADDITIONAL INFORMATION

IT IS IMPORTANT TO TICK BELOW IF YOU HAVE ANY SPECIFIC DIETARY REQUIREMENTS AND ALSO PROVIDE ANY ADDITIONAL INFORMATION I.E MOBILITY

NO FISH _____ NO MEAT _____ VEGAN _____ COELIAC / GLUTEN FREE _____ DIABETIC _____ NO SHELLFISH _____
 DAIRY FREE _____ GROUND FLOOR PREFERRED _____ RESTRICTED MOBILITY _____ WHEELCHAIR/WALKING AIDS _____
 ANY OTHER MOBILITY/DIETARY REQUIREMENTS OR OTHER REQUESTS _____
 Failure to complete this section might result in the meals being served that are not to your dietary requirements.
 Walking aids/wheelchairs must be declared prior to departure and are subject to weight and space availability
 If there is more than one name on this booking form you must **indicate to whom your special requests refer.**

Signed on behalf of all above named passengers _____ Date _____

This signed booking form is a contract between the above passengers and Simply Groups. All deposit & Insurance premium payments are non-refundable and non-transferable. Booking Conditions apply for all other cancellation charges. Terms and conditions can be accessed via our web site, or a copy can be sent directly to you on request.

Please complete this booking form and return with your non-refundable deposit & Insurance premium if required to:

Simply Groups, Dalton House, 1 Hawksworth Street, Ilkley, West Yorkshire, LS29 9DU

TEL 01943 605999 info@simplygroups.co.uk www.simplygroups.co.uk.

Any queries contact **Simply Groups** as above or **Gwen Wright** at: outings@theartsocietycranleigh.org

****IMPORTANT INFORMATION OVERLEAF PLEASE READ & SIGN****

ADVANCED PASSENGER INFORMATION

The following information is required for all non UK holidays. Names must be written as on passport
Please make sure that you complete all sections for each passenger both overleaf and below.

Name as on Passport:

Name as on Passport:

Passport Number:

Passport Number:

Expiry date:

Expiry date:

Nationality:

Nationality:

Date of Birth:

Date of Birth:

A valid passport is required for this tour

Passports must have a validity of 6 months from the date of return.

The 3* Flora Hotel is just a short walk from the lake, the centre of Stresa and the departure point for the Borromean Islands. As well as a restaurant, this smoke-free hotel has an outdoor pool and a bar/lounge. Other amenities include a poolside bar, a coffee shop/café, a seasonal outdoor pool and room service (during limited hours). All 32 ensuite rooms offer free WiFi, furnished balconies and flat-screen TV as well as a hairdryer and safe.

Dinner is a fixed 4 course menu (table service) - except soup & dessert. Drinks/Tea/Coffee are not included.

IMPORTANT INSURANCE INFORMATION

Simply Groups Ltd is an appointed representative of ITC Compliance Ltd who is authorised and regulated by the Financial Conduct Authority (their registration number is 313486) and which is permitted to advise on and arrange general insurance contracts.

Insurance if required is available as detailed overleaf and includes Insurance Premium Tax. This cover is arranged through **Wrightsure Services Limited**.

The '**Status Disclosure Document**' and the **policy terms and conditions** are shown on the Simply Groups Website, or please phone the Simply Groups office to request a copy. These show full details of terms and conditions of the policy.

A copy of the Status Disclosure Document and the Travel Insurance Policy document will be sent to those requesting this Insurance upon receipt of payment.

In particular please note : There are health conditions which the group organiser and group members should be aware of. Please read the Insurance policy, as any person who is unable to satisfy these conditions, may not be covered.

It is a condition that at the time of taking out this Policy and between that time and your departure you must comply with each of the following:

1. You are not aware of any reason why the trip should be cancelled or cut short.
2. You are not travelling:-
 - (a) against the advice of a medical practitioner
 - (b) for the purpose of obtaining medical treatment
 - (c) If you have been given a terminal prognosis.
3. You are not receiving or awaiting treatment for any illness or injury as a hospital day case or in-patient as any claim arising from the illness or injury will not be covered.
4. If you are on medication at the time of travel your medical condition must be stable/well controlled.

When travelling outside of the UK : You must notify the Helpline immediately of any changes in Health of the conditions listed below arising between the date the Policy is issued and the time of departure for the trip. The insurance company must be informed of any fact which is likely to influence them in the acceptance, assessment or continuance of this insurance. Failure to do so may invalidate this insurance, leaving you with no right to make a claim.

1. If you have received medical treatment as a hospital day case, inpatient or out-patient, during the six months prior to the booking of the trip, you must obtain medical advice from a medical practitioner at your cost confirming that you will be fit enough to take the trip.

2. If you are undergoing medical treatment as a hospital out-patient at the date the final balance of the trip is due to be paid, a certificate of fitness confirming your ability to travel must be obtained by you at your cost.

Should you have any queries regarding the suitability of the policy for your purposes please contact **Wrightsure Insurance on 01329 828228**

Please sign below to confirm your acknowledgment of the above information.

SIGNED.....

DATE.....