

Booking Form

One booking form per family



Parent / Guardian / Primary Contact Details

Your relationship to the child/children

Mr/Mrs/Ms

Address

Post code

Telephone (day)

Telephone (eve)

Mobile

Email

Child & Camp Details

Child 1

Child 2

Child 3

Child 4

First name

Surname

Gender

Date of birth

Age on arrival

Start date

Please send Study Smart Information to our Friends

Name:

Address:

Tel:

Name:

Address:

Tel:

Travel

Please tick as required:

Ireland Escorted Travel

Airport Pickup & Escorted Travel

Drop at Camp by Parent/Guardian

Please call Horizon for more details on pick-up points: Tel: 098 35844

Room Share

Name

Friend to be grouped with must be same sex and within 12 months of your child

Camp Costs

Programme Cost:

€

Transport Cost: (if required)

€

Other: (please state)

€

Total Due:

€

Payments:

Please enclose a deposit of €200 per child per week. Full Payment is required for all bookings made after 17th May.

Deposit:

€

Balance Due:

€

(Final Payment is to be paid no later than 17th May
Balance can also be paid by installments prior to this date)

Method of Payment:

Cheque Credit/Debit Card Other Please state method

Name on Card:

Card No:

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Security No:

Expiry Date: MM/YY

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Please sign below to state that you have read and agree to our booking conditions. Telephone/online bookings automatically confirm that you have read and accept the booking conditions

Signature:

Print Name:

Date:

One booking form per family: Booking made on behalf of other parents must have a separate booking form.