

Bruaich Mhor Self catering

5 Scullamus, Breakish,
Isle of Skye, IV42 8QB

BOOKING FORM

NAME.....

ADDRESS.....
.....
.....

POSTCODE.....

TEL (HOME).....

TEL (WORK).....

TEL (MOBILE).....

E-MAIL.....

PREFERRED CONTACT METHOD (please tick).....e-mail.....post.....phone.....

DATES REQUIRED.....FROM.....TO.....

WHERE DID YOU HEAR ABOUT US (please tick).....recommendation.....websearch
.....advertisement.....other.....

If other please
detail.....
.....
.....

Deposit sent (25%).....£.....

Balance due (6 weeks before arrival)....£.....

Any special
requirements.....
.....

Any other comments or questions
.....
.....

SIGNED BY
I have read and agree to abide
By the terms and conditions

Please return this form with your deposit cheque payable to Ms J Carmidy at the above address. We look forward to welcoming you to Bruaich Mhor.

For office use :.....Confirmation sent.....
Date booked:.....Balance received.....