

2015 BETTA OFFENBURG TRIP APPLICATION FORM

Title: _	First Name:	Name:
Date: _	BETTA member: YES / NO	
	Address:	Home Tel:
		Mob:
		Nationality:
	Postcode:	
Offenb Please + the t (Please r + if you Please: -	e indicate: type of ROOM(s) you would note that for individual bookings, only Single Room(s) Twin Room(s) u have special needs only carry one piece of hand luggage note that you will need to bring you, be advised that BETTA will not be re participants are strongly advised to remember to bring your up-to-date	prefer and how many: ly single rooms will be available). Double Room(s) The (Max.: 56cm x 41cm x 20cm/22"x 16" x 8" - 12kg/26lbs)) In own towel(s) It is sponsible for any accident occurring during the trip, all
l enclo	ose a cheque for	made payable to BETTA
		ontact BETTA on: 020 3441 6510 / 0771 717 6869
	l bettagroup@hotmail.com rs: (£250.00 per person); Non-Mem	abers (280.00 per person)
	ose a photocopy of the ID p nce Card (EHIC): □	age of my passport and one of my European Health
Signed	d:	Dated:
_	Ple	ease send form and cheque to
	BETTA, c/o Fairway Hall,	Brook Close, Borehamwood, Hertfordshire WD6 5BT