

2019 BETTA TRIP APPLICATION FORM

Title:	First Name:	Name:
Date:	BETTA m	ember: YES / NO
Address:		Home Tel:
		Mob:
		Email:
Postc	ode:	
l would	like to book adult a	nd children for the BETTA Trips
	Paris Trip	Offenburg
1	3 th to 15 th	27th to 30th
,	July 2019	September 2019
		Only
£35	0.00 Per Person	£330.00 for Non-Members
		£310.00 for Members
Please i	ndicate:	
	pe of ROOM(s) you would	
(Please not	e that for individual bookings, onl	y single rooms will be available). Double Room(s)
	Twin Room(s)	Double Room(s)
	have special needs	ax.: 56cm x 41cm x 20cm/22"x 16" x 8" - 12kg/26lbs))
	y carry one piece of hand luggage (wi e that you will need to bring your owr	
- be d	advised that BETTA will not be respon	sible for any accident occurring during the trip, all
	ticipants are strongly advised to arrai	nge their own travel insurance /EL DOCUMENTS, your EUROPEAN HEALTH
	URANCE CARD (EHIC) and any necesso	
l enclos	e a cheque for	made payable to BETTA
	-	ontact BETTA on: 07852 967160
	ettagroup@hotmail.com	
	e a photocopy of the ID p ce Card (EHIC):	age of my passport and one of my European Health
Signed:		Dated:
		ease send form and cheque to Brook Close, Borehamwood, Hertfordshire WD6 5BT
	NB: ALL BOOKING NEED TO	O BE PAID FOR IN FULL 1 MONTH BEFORE TRAVEL