

BOOKING CONFIRMATION FORM



PARTY DATE:

CLIENT CONTACT NAME:

BIRTHDAY CHILD NAME:

AGE:

ADDRESS:

POSTCODE:

TEL (HOME):

TEL (MOBILE):

EMAIL:

CHILDREN (MAX AGE 16):

MAX NUMBERS 25

EACH PARTY (2 HOURS DURATION): 6.15PM – 8.15PM

POOLS, JACUZZI, COFFEE SHOP • 1ST NOVEMBER – 30TH APRIL

£190.00 PAYMENT IN FULL AT TIME OF BOOKING

POOLS, JACUZZIS, COFFEE SHOP • 1ST MAY – 31ST OCTOBER

£220.00 PAYMENT IN FULL AT TIME OF BOOKING

ADDITIONAL HOURS AT £70.00 EACH PAYMENT IN FULL AT TIME OF BOOKING

CHILDREN MUST BE SUPERVISED AT A RATIO OF 1 ADULT TO 1 NON SWIMMER AND 1 ADULT TO 3 SWIMMERS

ARRIVAL TIME:

SWIM UNTIL:

DEPART. TIME:

BRINGING OWN FOOD (THIS INCLUDES CRISPS ETC):

WE DO NOT ALLOW GUESTS TO BRING THEIR OWN DRINKS

BOOKED BY:

DATE BOOKED:

I WISH TO HIRE REFLECTIONS (AS DETAILED ABOVE) AND DECLARE THAT I HAVE READ, UNDERSTOOD AND AGREE TO COMPLY WITH THE RULES & TERMS AND CONDITIONS

SIGNED BY HIRER:

DATE:

SIGNED BY MANAGEMENT:

DATE:

COPY OF SIGNED FORM TO BE PROVIDED TO CUSTOMER AS CONFIRMATION OF BOOKING