

European Castles Tours – Astrid Baur Travel

Hoehenstrasse 8, 87629 Hopfen am See, Germany / Fax 011 - 49 - 8362 - 91 67 23

RESERVATION REQUEST

Tour _____ **Departure Date** _____

Contact Name _____

Email _____

Address _____

City _____ **State / Province** _____

Zip / Postal Code _____ **Country** _____

Main Telephone _____ **Alternate** _____

Guests

#	Name
1	
2	
3	
4	
5	
6	

Costs

	Persons		Per Person		Amount
Adults, Double Occupancy	<input type="text"/>	@	<input type="text"/>	=	<input type="text"/>
Adults, Single Occupancy	<input type="text"/>	@	<input type="text"/>	=	<input type="text"/>
Adults, Triple Occupancy	<input type="text"/>	@	<input type="text"/>	=	<input type="text"/>
Children	<input type="text"/>	@	<input type="text"/>	=	<input type="text"/>
Total Cost					<input type="text"/>
Deposit (Due now)	<input type="text"/>	@	<input type="text"/>	=	<input type="text"/>
Balance (Due 45 days before tour)					<input type="text"/>

Special Requests or Notes

Emergency Contact (Optional) **Name** _____

Telephone _____ **Email** _____

Method of Payment

- PayPal. You will be billed at the email address above.
- Check for Deposit enclosed (and Balance Due payment to follow).
- MasterCard VISA *You will be charged for the Deposit when your reservation is confirmed, and for the Balance Due 45 days before the tour.*

Card Number _____ **Expiry Date** _____

Signature

I agree to the payment commitments summarized above and I have read and agree to the Astrid Baur Travel Terms and Conditions posted on the www.europeancastlestours.com website.

Signature _____ **Date** _____