<image/>	Berten Hart	2016
Title: First Name: Name: Date: BETTA member: YES / NO Address: Home Tel:	F The B	BETTA TRIP
Date:	Con Case Instances	APPLICATION FORM
Address: Home Tel: Mob: Nationality: Postcode: Email: I would like to bookadult andchildren for the BETTA Trips Fontenay Aux Roses Offenburg 3"d - 5th June 2016 23-26th September 2016 Both Trips Only Only Only £280.00 for Non Member £330.00 for Non Members £570.00 for Non Members £280.00 for Members £310.00 for Non Members £550.00 for Members £280.00 for Members £310.00 for Members £550.00 for Members £280.00 for Members £310.00 for Members £550.00 for Members £280.00 for Members £310.00 for Members £550.00 for Members Please indicate: + the type of ROOM(s) you would prefer and how many: (Please note that for individual bookings, only single rooms will be available).	Title: First Name:	Name:
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Twin Room(s) + if you have special needs		
 + if you have special needs	Single Room(s)	Double Room(s)
Please: - only carry one piece of hand luggage (Max.: 56cm x 41cm x 20cm/22″x 16″ x 8″ - 12kg/26lbs)) - note that you will need to bring your own towel(s) - be advised that BETTA will not be responsible for any accident occurring during the trip, all participants are strongly advised to arrange their own travel insurance - remember to bring your up-to-date TRAVEL DOCUMENTS, your EUROPEAN HEALTH INSURANCE CARD (EHIC) and any necessary VISA if required . Thank you! I enclose a cheque for made payable to BETTA If you wish to pay by cash, please contact BETTA on: 020 3441 6510 / 0771 717 6869 or email bettagroup@hotmail.com I enclose a photocopy of the ID page of my passport and one of my European Health Insurance Card (EHIC): □ Signed:	Twin Room(s)	
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