

For Office use only

Walk in : .....

Drive in : .....



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## Treveague Campsite Registration Form

Which Pitch Number are you allocating to your guest:

Do you want us to send the balance request to the details below : YES/NO

Have they stayed before? YES/NO Have their contact details changed? YES/NO

Name: .....

Address: .....

.....

Mobile No: .....

Email: .....

Arrival Date: .....

Duration of Stay: .....

No of Adults: .....

No of Children (5-7): .....

No of Infants (0-4): .....

No of Pets: .....

Accommodation (eg tent/caravan/campervan/motorhome): .....

Vehicle registration .....

Do you require Electric hook-up? YES/NO

Gazebo/Utility Cooking/Toilet Tent: YES/NO

Pup Tent: YES/NO

Extra Car/Motorbike: YES/NO

Awning: YES/NO

Where did you hear about the Campsite? .....

I confirm acceptance of Treveague Campsite Ltd's Terms & Conditions

Signed.....