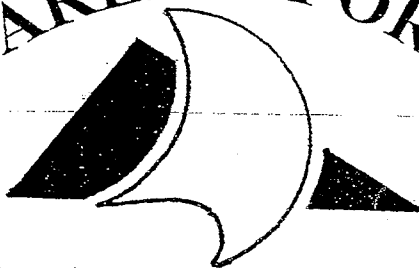


# CARLINGFORD



*Yacht Charter & Seaschool Ltd.*

Tel./Fax: 042<sup>93</sup><sub>7</sub>73879.

## BOOKING FORM

FULL NAME	_____
ADDRESS	_____ _____
DATE OF BIRTH	_____ NEXT OF KIN _____
OCCUPATION	_____
TELEPHONE (DAY)	_____ (EVENING) _____
DATES REQUIRED FROM	_____ TO _____
ALTERNATIVE DATES FROM	_____ TO _____
SAILING EXPERIENCE	_____ _____
COURSE REQUIRED	_____
I understand that the conditions of booking apply to me and I accept that the Skipper's decision is final on all sailing matters.	
SIGNED	_____ DATE _____

- PLEASE ENCLOSE :
- \* Booking Deposit of ~~€100~~ <sup>€150</sup> per week. Please make cheques payable to Carlingford Yacht Charter
  - On acceptance of this booking you will receive the following information :
  - \* Letter of confirmation.
  - \* Order form for wet weather gear (if requested ~~€4~~ <sup>€14</sup> per day or ~~€20~~ <sup>€70</sup> per week.)
  - \* Instructions for joining and leaving yacht.

PROPRIETOR : MICHAEL CAINE