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**Please complete and return to Eskimogul**

PARTY LEADER		CHALET NAME
Title	First Name	Surname
Address		
		Postcode
Telephone (day)		(evening)
Fax		Email
Arrival date		Departure date
Total Number:	Ad	ulsts: Childr en (u12): Infants (u2)

PARTY MEMBER DETAILS (please start with party leader)				
First Name	Surname	Age if under 18	Special Dietary Requirements	Insurance Details
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				

I have read and understood the booking conditions of Chalet Tintin or The Lodge.  
I accept these conditions on behalf of those booked in my name.

Signature	Date
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Please indicate below if you would like us to organise the following services for your party.  
We will contact you to discuss your individual requirements:

	How Many?
Transfers from Geneva required?    Yes/No	
Lift Pass ?                                    Yes/No	
Skis / Boots / Boards ?                    Yes/No	

**Flight Details: (if known at time of booking)**

**Date** ...../...../.....                    **Flight No.** .....

**Depart** .....                                    **HH** ..... **MM** .....

**Arrive Geneva** .....

  

**Dep. Date** ...../...../.....                    **Flight No.** .....

**Depart Geneva**    **HH**..... **MM**.....