



Booking form

5454 Crepe Myrtle Circle, Kissimmee, FL. 34758

Name: _____

Home Address:

Post Code (Zip Code) _____

Home Telephone _____

Party Number Adults: _____ **Children (under 18):** _____

Arrival : _____ **Departure** _____

Num Nights: _____

Sub Total: _____

Pool Heating Yes / No

Total Cost _____ **inc Tax**

I/We have read, understood and agree to abide by the terms and conditions on your website. (Copy Enclosed)

SIGNATURE _____ **DATE** _____

Please complete and either post or fax back to
UK: 0870 446 1101