

[www.ivyhouse-colwynbay.co.uk](http://www.ivyhouse-colwynbay.co.uk)

## Booking Form

Please use Block Capitals and address all correspondence to  
Mr C Duckworth, 13a Abergele Rd, Colwyn Bay, Nth Wales, LL29 7RS

Please reserve Ivy House Colwyn Bay for .....nights.

Arriving for the night of.....and departing on the morning of.....

Mr .....

Mrs.....

Address.....

.....

.....

.....

Post Code.....Telephone No.....

Additional person.....Adult	Child	*OAP
Additional person.....Adult	Child	*OAP
Additional person..... Adult	Child	*OAP
Additional person..... Adult	Child	*OAP
Additional person..... Adult	Child	*OAP

**Optional Extras**-Please tick if required.

1 babies cot available free of charge upon request.

Bed linen provided at a charge of £10 per week or per stay.

### Payment by cheque

A deposit of £40 is required at the time of booking with the balance due to be paid 21 days prior to holiday commencement. Cheques should be made payable to “**Diamonds**”

**Credit Card Payments**

Please delete as appropriate:-

- A) Deposit of £40 to be charged on booking then charge balance (Plus any optional extras due) to my card account 21 days prior to holiday commencement.
- B) Please charge my card account the Full Amount due (If booking within 28 days prior to holiday commencement)

Card Type .....(Visa or other)

Card Number.....

Issue Number.....

Start Date.....

Expiry Date.....

Signature of Cardholder.....

Expected time of arrival.....(After 2pm)

\*OAPs may be required to provide pension book, bus pass or other as proof of age