

CAMPING IBARRON***

BOOKING FORM

Name : First Name :
 Adress :
 Post Code : Town :
 Phone number : Country :
 E-mail : Registration number :

I agree to receive Camping Ibarron and N.R.L offers by e-mail.

I would like to stay from the/...../2024 to/...../2024 : Number of nights :

Person present :

Name First Name	Date of birth		
1...../...../.....	5...../...../.....
2...../...../.....	6...../...../.....
3...../...../.....	7...../...../.....
4...../...../.....	8...../...../.....

Extra Cost Animal : 3,5€ / night (only on campsite)

I SELECT MY ACCOMMODATION

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Camping pitch | <input type="checkbox"/> no electricity | <input type="checkbox"/> with electricity 6A | <input type="checkbox"/> Mobil-home 2 bdrms 4/5 people |
| <input type="checkbox"/> Camping pitch Comfort (shower, toilet, fridge) | | | <input type="checkbox"/> Mobil-home 3 bdrms 6 people |
| <input type="checkbox"/> Mobil-home 2 bdrms 4 people | | | <input type="checkbox"/> Tente Lodge 2 bdrms 4/5 people (with toilet and shower) |
| <input type="checkbox"/> Mobil-home 2 bdrms 4 people comfort (2 showers and 2 toilets) | | | |

(Please check the distribution of beds carefully, some accommodations have bunk beds that are only suitable for children between 6 and 12 years old.)

I SELECT MY OPTIONS (Available only for rentals)

- Cleaning end of stay accommodation 2 bdrms (extra cost. 70€)
- Cleaning end of stay accommodation 3 bdrms and Mobil-home Comfort (extra cost. 85€)
- Cleaning end of stay pitch comfort with sanitary (extra cost. 25€)
- Double bed sheets kit X..... : (Extra cost 12€/ Kit)
- Single bed sheets kit X..... : (Extra cost 10€ par Kit)
- Baby Kit (Cot + high chair subject to availability - no sheets or mattress toppers provided) : Free

DEPOSIT

Amount of my stay (without the tourist tax) : € X 25% = €
 I subscribe holidays cancellation : 2.90% of the cost of the stay : + €
 I don't subscribe holidays cancellation
 Booking fees : + 15.00€
Deposit to pay = €

I pay my deposit with :

- Online payment
- Bank transfer (La Banque Postale IBAN FR3620041010012272268A02248 BIC PSSTFRPPBOR-Please give us your client number)
- I acknowledge and I am aware of the booking terms of which I agree.

I undertake to pay the balance of my booking at the latest **30 days before the date of my arrival.**
 (For bookings made less than 30 days before the date of arrival, full payment must be made at the time of booking)

At..... The...../...../..... Signature (receded by the mention "Read and accepted" ») :