Aveland House

Aveland Road, Babbacombe, Torquay, Devon, TQ1 3PT
Tel : 01803 326622 Fax : 01803 328940
E-mail avelandhouse@aol.com Web site www.avelandhouse.co.uk

NO SMOKING

- To reserve accommodation a deposit of 100% of first night per room per week is required
- Children under 12 years of age charged at half adult tariff, when sharing a room with two adults
- One to three night bookings to be paid in full in advance
- Please make cheques payable to **Aveland House.**
- Rooms cannot be reserved until payment is received
- All accounts to be settled on arrival, by cash, credit/debit card or cheque with a valid bankers card
- Rooms will be available from 2pm on day of arrival. Rooms to be vacated by 10am on day of departure
- Breakfast served 7.45am to 8.45am.Early breakfast by arrangement.
- Evening meal (optional) available Mon to Sat £16.00 per person. Served at 6.00pm
- Due to catering for guests with allergies we are sorry we are unable to accommodate pets.

No takeaway meals or food allowed in premises

Rooms available: 4 x Double 1 x Superior Double 2 x Twin 1 x Family 4 1 x Family 3 1 x Single

To reserve accommodation please print out and post* BOOKING FORM *with deposit using Cheque or credit/debit card, provisional bookings can be sent via fax, phone or email.

Cut here .....Cut here

BOOKING FORM

Name: _____

Address: _____

_____

_____

Post code: _____

Telephone No: _____

No of adults :_____

No of Children: _____

Ages of Children: _____

Date of Arrival: _____

Date of Departure: _____

Approximate time of arrival: _____

Accommodation required (please tick)

[ ] Family Room (2 adults 2 children)

[ ] Family Room (2 adults 1 child)

[ ] Double Room

[ ] Superior Double Room

[ ] Twin Bedded Room

[ ] Single Bedded Room

[ ] Bed & Breakfast

[ ] Bed, Breakfast & Evening Meal

No evening meal on Sunday (Please tick required days)

Monday [ ] Tuesday [ ] Wednesday [ ]

Thursday [ ] Friday [ ] Saturday [ ]

Special Dietary Requirements: _____

I enclose a deposit of £ _____ Cheque payable to **Aveland House** or please debit my card.

Visa / Mastercard / Maestro / Solo / Visa Electron / JCB / (Delete as appropriate)

Card No [ ][ ][ ][ ] [ ][ ][ ][ ] [ ][ ][ ][ ] [ ][ ][ ][ ]

Start date _ _/_ _ Expiry date _ _/_ _ Issue No (Maestro only) _ _ _ _

Security No _ _ _ (last 3 digits on back of card)

Mr / Mrs / Miss / Ms Initials..... Surname.....Signature.....

Resident proprietors: **Jacqui & David Blenkinsopp**

Please read booking terms & conditions