

Haggerston Castle - Owners Exclusive Charity Complimentary Pass Form

2021

Owners Name:

Caravan Number:

Your Guest's Booking Name:

Your Guest's Address:

Date Of Arrival:

Date Of Departure:

	<u>Name</u>	<u>Age</u>	<u>D.O.B (If Under 18)</u>
1			
2			
3			
4			
5			
6			
7			
8			

I confirm that the persons listed above are guests of our organisation and I wish them to receive our holiday home's keys and holiday passes for the appropriate time.

Officer's Name:

Official Stamp

Officer's Position:



Date:

Officer's Signature:

Please Note: Passes Will Be Only Be Issued On The Correct Completion Of This Form.