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Contract for Bed & Breakfast reservation

This document is not an invoice

surname _____ First name(s) _____
 Address _____
 Postcode _____ Town _____
 Country _____ E-mail _____
 Telephone number _____
 Mobile _____

Date of arrival (between 4 and 7 pm) ___ / ___ / 2019
 Date of departure (before 11 am) ___ / ___ / 2019 total of nights ____

Don't forget to let us know if you arrive after 7 pm

Price of the rooms for 2 people breakfast included

Room	Guests	Price per night	nights	Total price of the room
Family room 2/3/4/5 guests				
Triple room with shower				
Triple room with bath				
Double room, pool side				
Extra bed (15 Euro)_				
Double room				
Total price				A €

Breakfast for extra guests	Guests	Nights	Total price for breakfast
Breakfast (age 10 & up) 8,50 Euro			
Breakfast (age 3-9) 5,00 Euro			
			B €

Total price for the room including breakfast A+ B	C €
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- Baby cot free of charge (when available) Yes
 High chair free of charge Yes

Number of people

+ 18 years		10-18 years		3-10 years		0- 3 years		total	
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The tourist tax rate is 0,57 € per night per person 18 years + and has to be paid on the day of arrival
Total amount for _____ persons 18+ X _____ nights = _____ €

Deposit

Deposit _____ € (30% of total amount C = _____) and a minimum of 1 night

Payment by:

French cheque to STAM CORINE Paypal Cash

Bank transfer

Code banque 17106 Code guichet 00017 Numéro de compte 18129005099 clé RIB 80

Titulaire STAM CORINE IBAN FR76 1710 6000 1718 1290 0509 980 BIC AGRIFRPP871

The balance of the total amount is due upon arrival day

total _____ €

total tourist tax

total _____ €

total price on arrival day

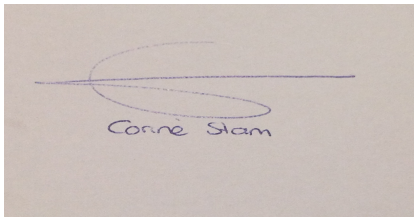
total _____ €

Unfortunately at the villa we do not accept credit cards

Observations: _____

This reservation comes into effect upon receiving a signed copy of this contract along with the deposit.

It is possible to reschedule or cancel your reservation. If you notify us of your cancellation more than 15 days before your arrival, your deposit will be reimbursed. However, if the cancellation occurs less than 15 days before your arrival, your deposit will not be refunded. In case of a shortened stay, the price corresponding to the costs for the accommodation remains due in full. Unused benefits will be refunded.

Date _____ Owners signature 	I have read and accept the booking conditions Date ___ / ___ / ___ signature of the guest followed by the following words «lu et approuvé»
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