

**CLASSIC CAR TOURS (MK)**  
**BOOKING FORM**

TOUR (Please specify).....

DRIVER NAME.....

ADDRESS.....

.....

POST CODE..... PHONE .....

E-MAIL.....

PASSENGER NAME.....

CAR, MAKE.....MODEL.....

YEAR OF MANUFACTURE.....REG. NO.....

ANY SPECIAL REQUIREMENTS (e.g. diet/single rooms/extra nights)

.....

.....  
**DEPOSIT £150 weekend tours £400 longer tours**

**One day tours full fee on booking.**

**Please make cheques payable to; CLASSIC CAR TOURS (MK) and forward with this form to;**

**Classic Car Tours (MK), 125, Helmside Road, Oxenholme, Kendal. LA97HD**

**Alternatively use BACS – Sort Code 16 22 23 Acc. No. 10109005**

I have read the terms and conditions which form the basis of this contract and agree to abide by them. (See website; [www.cctmk.co.uk](http://www.cctmk.co.uk), or ask for copy)

SIGNED.....DATE.....

OFFICIAL USE ONLY

Deposit received.....Acknowledged.....

Balance received.....Acknowledged.....

EXTRAS.....TOTAL.....

Final Instructions sent.....