



APPLICATION FOR A CARAVAN HOLIDAY 2020

I WOULD LIKE TO APPLY FOR A HOLIDAY IN A CARAVAN AT HAVEN (DEVON CLIFFS) SANDY BAY, EXMOUTH FOR ONE WEEK AS INDICATED.

I AGREE TO PAY £50(£90) PER ADULT AND £30(£50) PER UNDER 16 YEARS, AS A DONATION, TO ENABLE DREAM-A-WAY TO CONTINUE TO PROVIDE THESE FACILITIES.

*****DONATION OF £90 PER ADULT/£50 PER UNDER 16 YEARS FOR ALL BOOKINGS DURING ALL SCHOOL HOLIDAY DATES*****

Each week starts on Saturday at 2pm and ends the following Saturday at 10am

1st (preferred) Start Date

2nd choice start date.....

3rd choice start date

My Name (Party Leader).....Date of Birth.....

My Address.....Postcode.....

My email address (please write clearly).....

My Home Telephone No.....Mobile.....

OTHER PARTY MEMBERS

	Name in full	Date of birth	Age at date of holiday
1			
2			
3			
4			
5			
6			
7			

PTO

Patron: Sir John S Evans OstJ QPM DL LL.B | President: Nigel Mansell CBE | Chairman / Trustee: Jeff Merrett MBE
Trustees: Gill Freeman | Darren Galliford | Tina Kingdom | Phil Roberts / Tony Johnson

Charitable Incorporated Organisation. Registered Charity No.1155175
66 Bishops Way Exeter EX2 7PF
info@dream-a-way.org | www.dream-a-way.org



IMPORTANT (Must be fully completed)

1. Please indicate the names and the disabilities of the people with disabilities in your group

Guest Name :.....

Their Disability :.....

2. Does any group member require wheelchair access? -All our caravans have accessible ramps
Y/N

Please provide the name and contact telephone number of a friend, relative or carer who can be contacted in an emergency, whilst you are away.

Name.....Tel.....

Have you stayed in a Dream-A-Way caravan previously Y/N

If yes what dates Van No.....

DECLARATION

I agree to ensure that our group take good care of all of Dream-A-Way property and will report any faults or damage.

I agree to pay a minimum of £50 (£90) donation per adult and £30 (£50) per child per week, **(cheques payable in advance to Dream-A-Way) or BACS to VIRGIN XXXX**

I will ensure that all members of my group comply with the park rules and there will be no smoking or pets in the caravan.

I agree to leave the caravan in a clean and tidy condition or I will be subject to an extra charge

Dream-A-Way is not responsible for the holiday insurance of my party.

I understand that information contained in this application will be retained by Dream-A-Way and that I can apply for a copy of relevant personal information stored by Dream-A-Way.

Signed.....Date.....

Please return the completed form with a correct value stamped self-addressed envelope and a cheque for the required amount payable to Dream-A-Way to:

Jeff Merrett MBE
66 Bishops Way
Exeter
Devon EX2 7PF

**Please note:
All bookings will be confirmed in writing by Dream-A-Way**