



RESERVATION FORM

Please, print it and fax it at this fax number:
+39 055 8966729

Full name: _____

Address 1: _____

Address 2: _____

City: _____

State: _____ ZIP: _____

Stato: _____

E-mail: (Very important. Please, spell and write correctly with capital letters)

Telephone: _____

Fax: _____

Signature: (required) _____

Check-in: _____

Check-out: _____

Apartment (required): _____

N° Adults: _____

N° Children: _____

Notes: _____

Terms and Conditions:

Weekly prices, expressed in euros, from Saturday to Saturday. Caution deposit: upon the arrival of our guests we ask for a deposit of 150,00 Euro which will be returned at the end of their stay. Check-In from 15.00 to 19.00 - Check-out by 10.00 am. Prices include: you can see "Prices" page on www.ilborghettino.com. We can never accept payment with credit card. All payments excepting those made on the spot in cash will have to be made through bank transfer orders. We will give you our bank account details on receipt of your requested booking. At the moment of booking we require an initial 30% payment for the stay. We ask for a further bank transfer with the balance 60 days before the start of the holiday. In case of renunciation up to 40 days before the start of the holiday, 50% of the payment made will be reimbursed. From the 39th day up to the day of arrival no refund will be made.

I have read the Terms and Conditions and I approve them.

Ilborghettino.com guarantees that all the given information will be treated according to the Italian law 675/96 about the Privacy.