



# Cairngorm Mountain Motorhomes Booking Form

After submitting the Booking Form the deposit of £150 will be payable via bank transfer. Bank details are as follows: Aberdeen Risk Management Services Ltd, Acc no:00122564, Sort code: 832312

**IMPORTANT – Please note that this is a pre-request notification to book the Motorhome. A booking will not be confirmed until the deposit has been paid, received and accepted.**

Ensure that the following details are filled out correctly. Failure to include all details may delay confirmation of Your booking.

<b>Period of Rental Hire (i.e. from-to which dates you would like to book):</b>	
<b>Anticipated Destination/ Itinerary:</b>	
<b>Full Name of main driver (required):</b>	
<b>Full Address inc. Postcode (required):</b>	
<b>Email Address(required):</b>	
<b>Mobile Telephone No (required):</b>	
<b>Date of Birth (required):</b>	
<b>*I can confirm that I am over 25 years of age and no older than 79 years of age</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Occupation (required):</b>	
<b>Driver Licence No (required):</b>	
<b>*I can confirm that I have held a full driving licence for at least 2 years</b> Yes <input type="checkbox"/> No <input type="checkbox"/> Please complete the DVLA license check form via this link <a href="http://www.viewdrivingrecord.service.gov.uk/driving-record/licence-number">www.viewdrivingrecord.service.gov.uk/driving-record/licence-number</a> to obtain the code provided so we can complete a licence check. Please enter the code you receive below. (A separate page will open to access the Driving Licence Information Form to obtain the code we require to perform a license check)	
<b>*I confirm that I am in good health. "Good Health" being defined as having no mental or physical disabilities that would interfere with Your ability to drive. For example (but limited to) strokes/ deafness/ heart condition/ diabetes/ loss of limb/ loss of sight in an eye/ epilepsy, etc.</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	



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**\*I confirm that I am not taking drugs likely to affect my driving or drugs prescribed by a registered medical practitioner for the treatment of drug addiction**

Yes

No

**Please give details of any criminal convictions in the last 5 years (if none state 'None'):**

**Have you had any accidents/ claims within the last three (3) years (if none state 'None'):**

**If yes please provide details:**

**Please give full details of all passengers (not driver) (names and date of birth):**

**Passenger 1:**

**Passenger 2:**

**Passenger 3:**

**Dog(s): (name, age, breed) \*please note we accept 2 small dogs or 1 medium sized dog – please confirm with us before booking\***

**\*I confirm that I have read and agreed with the Terms and Conditions of Hire:**

Yes

No