

## BOOKING FORM

To request a booking for Linksview Cottage please complete the below form with your requirements and post to us at the above address

*Full Name	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
City/Town	<input type="text"/>
County	<input type="text"/>
Postcode	<input type="text"/>
*Country of Residence	<input type="text"/>
*Telephone Number	<input type="text"/>
*Email address	<input type="text"/>
*Date from (dd/mm/yy)	<input type="text"/>
*Date to (dd/mm/yy)	<input type="text"/>
*Number of nights	<input type="text"/>
*Cot Bed required	<input type="text"/>
*Number of adults	<input type="text"/>
* Number of children	<input type="text"/>
Comments	<input type="text"/>

\* required fields