



We operate a strict no smoking policy in all our bedrooms and public areas

La Villette Hotel & Leisure Suite Guernsey Channel Islands Tariff 2020

RESERVATION FORM

Name (Mr / Mrs / Miss) _____ Initials _____ Age if under 12 yrs _____

Number of Nights: _____
 Arriving on (date): _____ Time: _____ Leaving on (date): _____ Time: _____
 Hire Car required: Yes /No Date (from) _____ to _____ Air _____ Flight No _____
 Time (from) _____ to _____ Dock _____ Hotel _____
 Room requirements (all rooms En Suite)
 Single Bath/Overhead Shower **OR** Walk-in Shower Double Bath/Overhead Shower **OR** Walk-in Shower
 Twin Bath/Overhead Shower **OR** Walk-in Shower Family Bath/Overhead Shower
 Double room with adjoining Single room
 A Deposit of one nights stay (room rate) is required. Total deposit enclosed £ _____
 Signature _____ Date _____
 Address _____
 _____ Tel No (home) _____
 _____ Tel No (business) _____