



community
enterprises PL12

Hopper Bus Group Booking Form

Contact details

Customer Name

Name of Group

Home Address.....

Email address:-

Home Tel:- Mobile No:-

Details of journey required

Date How many passengers?..... Pick up time.....

Destination (including post code if possible)

Where do you want the pick points to be?.....

Where do you want to finish at Saltash?..... Time

Any stops required on route?.....

Any disable requirements e.g. wheelchairs.....

Any non transferable wheelchair passengers. If so how many ?.....

Any luggage, heavy goods, mobility equipment?

Any non transferable wheelchair users?

Customer Signature..... Date.....

Terms and conditions

10% deposit (none refundable if cancelled within 10 days of trip)

Full payment required two weeks prior to trip.

Agreed cost of trip: £.....

Staff member signature..... Date.....

Invoice No Date paid.....

Community Enterprises PL12

Contact Address :- 4 Fore Street, Saltash, PL12 6JL

Contact Phone: 01752 848348

Contact e-mail: hopper@communityenterprisespl12.co.uk

Cheques payable to :- Saltash Gateway CIC (Transport)

Bank Transfers :- Sort Code 30-12-74 Account No 41691560

VAT No :- 277 3442 82