Wild Adventure Campers Ltd., trading as Wild Atlantic Campers Booking form

Carnmore Cross Oranmore Co. Galway Ireland

Tel: +353 (0)89 4252780

Please complete and return to us by post or email to info@wildatlanticcamperhire.ie or wildatlanticcampers@gmail.com

Campervan rental details		
Campervan berth required		
Date from:	Estimated pick up time:	
Date to :	Drop off time:	_
Number of adults:	Number of children	
Main Driver Details		
First name:	Surname	
A ddwood		
Dostanda		
Postcode		
Country		
Phone (home)		
Phone (work)		
E-mail Address		
Date of birth		
Occupation		
F 1 2 N		
Employer's Name		
Employer's Address		
Employer's Telephone Number		
Driving Licence No		
Licence Issued by:		
Licence Valid from	Licence Valid to:	
Licence Endorsements/ Penalty Po		
If yes please give details, codes an	d dates of any penalty points	
Have you ever been refused insura	ance? Yes / No	
Have you had any road accident in	the last five years? Yes / No	
_		
[rint name in block capitals) have received and agree with	all the
terms and conditions of Wild Adve	enture Campers Limited, trading as Wild Atlantic Campe	rs.
Signed	Date	

(Only complete page 2 if there is a second driver)

Second Driver Details	
First name:	Surname
Address	
Postcode	
Country	
Dhana (hama)	
Phone (home)	
Phone (work)	
E-mail Address	
L man / radiess	
Date of birth	
Occupation	
1	
Employer's Name	
Employer's Address	
Employer's Telephone Number	
Driving Licence No.	
Licence Issued by:	Licence Valid to:
Licence Valid from	Licence Valid to:
L'	· / N
Licence Endorsements/ Penalty Points Y If yes please give details, codes and dates	
if yes please give details, codes and dates	s of any penalty points
Have you ever been refused insurance?	Yes / No
That e you ever open reluged insurance.	1657110
Have you had any road accident in the la	st five years? Yes / No
J J	,
[](Print name i	in block capitals) have received and agree with all the terms
and conditions of Wild Adventure Camp	ers Limited, trading as Wild Atlantic Campers.
Signed	Date