

**FOUR SEASONS FAIRWAYS GOLF REQUEST FORM
PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS**

DAY AND DATE OF ARRIVAL.....WEEK NO.....

LEAD NAME.....VILLA NO.....

DAYTIME TELEPHONE NO.

FAX NO

E - Mail

CREDIT CARD TYPE AND NO.....

EXPIRY DATE...../.....

NAME PRINTED ON THE CREDIT CARD.....

Please specify Gentleman, Lady or Junior

PLAYER.....	HDC.....	PLAYER.....	HDC.....
PLAYER.....	HDC.....	PLAYER.....	HDC.....
PLAYER.....	HDC.....	PLAYER.....	HDC.....
PLAYER.....	HDC.....	PLAYER.....	HDC.....

COMMENTS:.....

OFFICE USE ONLY

DATE	NO. OF PLAYERS	COURSE	TIME		COMMENTS
			EARLY	LATE AM	

DO NOT FORGET ANY RESERVATIONS FOR OUR FAIRWAYS GOLF COMPETITIONS

TUESDAY GOLF COMPETITION
QUINTA DO LAGO SOUTH
OR NORTH

DATE..... NO OF PLAYERS.....
DATE..... NO OF PLAYERS.....
DATE..... NO OF PLAYERS.....
DATE..... NO OF PLAYERS.....

I HAVE READ AND AGREE TO THE FOUR SEASONS FAIRWAYS GOLF BOOKING CONDITIONS.

..... (LEAD
NAME SIGNATURE ONLY)

WITHOUT A SIGNATURE OR FULL CREDIT CARD DETAILS ,WE ARE UNABLE TO PROCESS

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