

Credit Application Form

Company Name									
Company Address									
•									
Post Code	VAT number								
Phone Number	Fax Number								
Please provide References of CURRENT CREDIT providers									
REFERENCE 1									
-									
-									
Post Code	Phone Number								
REFERNCE 2									
-									
_									
Post Code	Phone Number								
Name of person invoices	should be sent to								
Address of Accounts Dep If different from above	partment								
Accounts Phone Number									

Terms and Conditions

Credit Applications are subject to two satisfactory references. Invoices are required to be settled within 30 days of the invoice date.

All Accommodation cancellations 10 days	cancellations need prior, to avoid a can	to be notified cellation fee.	to us	in writing	by 6p	om the	day pr	ior to	arrival	and	Meeting	Room