



# Berg River Resort

T 021 007 1852/3  
 F 086 215 1401  
 E info@bergriverresort.co.za  
 www.bergriverresort.co.za  
 R45 FRANSCHHOEK ROAD, PAARL, 7646  
 Find us on Facebook and

BERG RIVER TRUST, MASTERS REFERENCE NUMBER IT 638/97 T/A BERG RIVER RESORT

## RESERVATION APPLICATION FORM

Please note this is an application and not a confirmed booking. Kindly wait for your confirmation letter.

ARRIVAL DATE			
DAY	MONTH	YEAR	TIME
			<b>AFTER 2PM</b>
DEPARTURE DATE			
DAY	MONTH	YEAR	TIME
			<b>BEFORE 10AM</b>
ACCOMMODATION OPTION			
CHALET	CARAVAN SITE	TENT SITE	ELECTRICITY (YES/NO)

GUEST NAME AND SURNAME	
ID NUMBER OF APPLICANT	
ADDRESS	
DAY TIME CONTACT NUMBER	
CELL NUMBER	
EMAIL ADDRESS	
NUMBER OF ADULTS	
NUMBER OF CHILDREN	
AGES OF CHILDREN	
VEHICLE REGISTRATION NUMBER	

Please stipulate which chalet, site or general area in the resort is preferable.

.....  
 .....

How did you find out about us?

.....

I hereby understand and agree to abide by Berg River Resort's Terms and Conditions.

I hereby agree to abide by the Berg River Resort rules and accept the waiver.

Signature .....

Date .....