UNION TOURISTIQUE LES AMIS DE LA NATURE
Saint-Louis Section
REFUGE DE LA BIRGMATTE

RES-001 – RESERVATION REQUEST

Person responsible for the reservation

Last name	
First name	
Address	
Postcode / Town	
Telephone	
Email address	

Stay

Arrival date	
Arrival time	
Departure date	
Departure time	
Adults	
Children	

■ Day visit ■ Overnight stay ■ Family ■ Group ■ Association ■ Club ■ Company ■ School

Additional information:

_____

_____

■ I have read the Booking Conditions.
■ I accept the House Rules.
■ 30% deposit.

Date _____ Signature _____

For association use only

File no. _____ Deposit _____ Confirmation _____