

# ROCQUAINE BAY APARTMENTS

RUE DES SALINES, ST PIERRE DU BOIS, GUERNSEY GY7 9HL

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www.rocquainebay.com

## TARIFF - 2025

PRICE PER APARTMENT PER WEEK

Up to 4 people

1 January – 23 May	£945
24 May – 30 May	£1440
31 May – 18 July*	£1080
19 July – 5 September	£1440
6 September – 20 December	£945

*Special Offer - All 2025 bookings (excluding Bank Holiday Weekend, 24 – 30 May and High Season 19 July – 5 September) - 15% OFF above prices for 2 person occupancy.*

**\*\* Please enquire by telephone or email for Winter tariffs and availability**

**\*Christmas bookings are charged at June rates\***

**In excess of 4 persons in an apartment a supplement of £210 per person per week applies.** Infants aged under 2 free of charge.

Pets accepted - £150 per pet per week (£21 per night thereafter)

A deposit of 25% is required with all bookings. Balance is due one month prior to arrival.

Payments accepted by Online Bank Transfer (BACS) or Credit/Debit Card

Please note that payments made are not refundable unless re-letting is achieved. **We strongly recommend that you take out a General Travel Insurance which will cover you against loss for circumstances beyond your control.**

Check-in time is 2pm and check-out 10am. Any day changeover and any length stay can be accommodated where available (please note that bookings less than 7 nights will incur a £150 surcharge). Open all year round.

Accommodation is centrally heated outside of the summer season

## RESERVATION FORM 2025 ROCQUAINE BAY APARTMENTS

**How did you hear about our apartments?** (tick appropriate box)

<input type="checkbox"/> Visit Guernsey Brochure	<input type="checkbox"/> Friend
<input type="checkbox"/> Travel Agent	<input type="checkbox"/> Internet
<input type="checkbox"/> Magazine Advertisement	<input type="checkbox"/> Family visit
<input type="checkbox"/> Previous visit	<input type="checkbox"/> Other

### FOR OFFICE USE ONLY

Charts  Data  SC  Apt No.

Total £                      Deposit £                      Balance £

<b>Please list full party details in block capitals</b>				<b>Address for all correspondence which will be sent to the first named person who <u>must also sign this Reservation Form.</u></b>
Title	First Name	Last Name	Age if under 18	
<b>Signature of party leader</b>				POSTCODE:
Total Party size:				TEL: (HOME/WORK)
Infants aged under 2:				MOBILE:
Pets:				E-MAIL:
Cot/highchair required?				Arrival date:
Remarks:				Arrival time (if known):
				Arrival day:
				Departure date:
Reason for stay:				
A confirmation email will be sent with payment amount and details once we have received the completed form.				
Signature				Date

**Please note that we are required to maintain a record of this information for a minimum of 2 years in accordance with the Committee for Economic Development.**