Booking Reference



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Special Requirements Form

One form to be completed for each client with special requirements

Completed forms cannot be accepted within 21 days of the tour departure

Holiday	y No.	Resort Hotel			Dat	e	Days
Title	Surnam	e		Initial		Room Type (e.g. Twin/Twi	
		g Ref. of travelling companic ou in case of emergency:	n				
Descri	ibe your I	Disability and Medical Terr	m for Disability				
Blue Ba	dae Num	ber/Doctor's Note?	Yes 🗆 🛛 🛛 🗖 T	BC 🗆			

Please answer the following questions as thoroughly & accurately as possible. Hotels will allocate rooms solely on the information provided which can subsequently be changed.

Accommodation Requirements

A1. Do you have a specific request for a room with a bath or shower?

Bath
Shower over bath
Easy Access Shower

An easy access shower is a shower with only a small step into it. If you need a true disabled shower (usable in a wheelchair), please write to us separately.

	Dietary Issues	Yes	NO	N/A
D1. Require a diabetic diet	Dielary 135065			
D2. Require a gluten free diet				
D3. Other special diets				

If you have non-standard dietary requirements, you must make direct contact with the hotel at least two weeks prior to arrival and forward a diet sheet to the hotelier with details of any foodstuffs you will be taking with you.

Other Disability Issues

O1. Refrigerated storage required for medicines (please note sharps bins mu	ist be t	aken wi	ith you if you	
have any medication which is administered by injection).				
O2. Blind or partially sighted client - prefer brightly lit bedroom				
Reception please note for Fire Drills				
O3. Client with hearing impairment?				
Reception please note for Fire Drills				
O4. Some hotels have special devices for profoundly deaf clients which provi	ide an i	under-p	oillow vibrating	
alarm in the event of the fire alarm sounding. Do you require one of these?				
O5. Do you require written instructions from your driver?				
O6. Oxygen: I will be bringing oxygen with me on holiday and require a charging point near my bed				

Assistance Dogs

 $\begin{array}{c|c} \mbox{Please tick the box to indicate the type of assistance dog you intend to take} \\ \mbox{Sight} \ \square & \mbox{Hearing} \ \square & \mbox{General Assistance} \ \square & \mbox{ID No} \end{array}$

Please provide your dog ID number or letter of verification from the charity that provided your dog. Assistance dogs must wear their identifying jackets at all times.

The owner must carry and produce on request the Environmental Health and Identification Cards.

Mobility Problems

Important information

It is essential that you can manage the 4 or 5 entrance steps on the coach (step height 14") either completely unaided or using only the assistance provided by members of your own party.

Please Note: Very few of our hotels have ground floor rooms and many ground floors feature a number of steps.

	Yes	No	N/A
M1. Can you walk unaided?			
M2. Can you board/leave a coach with only assistance from members of your own party?			
M3. Are you taking a wheelchair with you?			

Please Note: Our coaches do not have wheelchair lifts. Wheelchairs must be manual and collapsible. We cannot carry electrically operated wheelchairs on feeder coaches.

M4. Is a wheelchair needed to access your hotel bedroom?		
M5. Would you like to hire a wheelchair in resort?		

We can normally provide you with details of wheelchair hire in most UK resorts, but you must make your own arrangements directly with the company which hires the wheelchairs and we cannot take any responsibility for such arrangements.

M6. How many sta	airs are you able to manage?	(Please tick)			
5-14 stairs	15 - 20 stairs (1st floor) \Box	30 - 40 stairs (2nd floor)		More 🗆	
•	to <u>descend</u> stairs from the up	per floors to escape from th	ne builc	ling	
in case of fire?					

 \square

M8. Do you need a room near a lift? Please note that rooms close to lifts can sometimes suffer from lift noise.

Any Further Comments				
I understand that Alfa Travel Ltd will end cannot guarantee that all needs will be r	deavour to meet all requests listed above although they met.			
Signature:	Date:			
<u>For office use only</u> Sent to Hotel on:	By:			
Hotel Allocated: Floor: (G,1,2,3,4,5)	Bath/Shower (B/S) Room No:			
Hotel Receptionist Signature	Date			

PLEASE RETURN BY EMAIL TO: care@alfatravel.co.uk