



P.O Box 46  
Barkly West  
8375

Gretha Badenhorst  
Tel: 053 531 9700/082 416 6539  
Email: [info@wildeklawer.com](mailto:info@wildeklawer.com)

For office use:

1	Surname		Age	Gender	Health (staircase)
2	Name				
	Family 1				
	2				
	3				
	4				
	5				
	6				
	7				
3	Address	Code:			
4	Telephone	Work:	Home:		
5	Cell phone				
6	Email				
7	Church (denomination)				
8	Designation (work)				
9	Head office		Telephone		
10	Contact person		Telephone		
11	Arrival				
12	Departure				

- 13 Arrival only from 12:00; departure no later than 10:00 please.
- 14 The maximum length of stay is 3 weeks. (It can be extended during the beginning of November in case of no other reservations) During December it is 2 weeks.
- 15 During December, either Christmas or New Year can be included, but not both.
- 16 Please confirm your time of arrival at least one hour prior thereto with **Janeen Vosloo at 072 593 1245.**
- 17 Please include a letter of recommendation from your church leader/head when submitting this application.
- 18 A deposit of R300 will be payable to confirm your booking. (Non-refundable)

- 19 Account details:  
**Pro Regno Trust Elim**  
**Account number: 0940176565**  
**Branch code: 008207**  
**Reference: Your name and surname**
- 20 Please email your proof of payment to [info@wildeklawer.com](mailto:info@wildeklawer.com)

21	Booking fees:						
		Tariff pp	Number of rooms	Maximum number of occupants	Minimum fee/day	Number of stairs	Mark your choice
	Unit 1	120	2	8	480	Level 3	
	Unit 2	110	2	6	330	Level 2 (4 stairs)	
	Unit 3	70	1½	5	175	Level 2 & 3	
	* Unit 5	30	1	2	30	Level 1 (1 stair)	
	Unit 6	100	2	5	250	Level 1 (no stairs)	
Please mark your choice between units 1 to 6. Final placement will be at owner's/manager's discretion. *Unit 5 has no kitchen and can only be used if extra room for children is needed as complementary to another unit being occupied already. Unit 7 and 8 will only be used if all other units are occupied.							
	Unit 7	50	1	3	75	Level 1	
	Unit 8	120	1	2	120	Level 1	

22 **Personal details (will be treated as highly confidential)**

		Husband	Wife
Monthly	Salary		
	Other income		
Annual	Bonus		
	Subsidy		
	Donations		
	Other income		

I hereby confirm that all information supplied by me and my spouse is true and correct, with special reference to the financial details.

I also undertake to adhere to the rules as attached.

\_\_\_\_\_  
 Husband's signature

\_\_\_\_\_  
 Wife's signature

\_\_\_\_\_  
 Name and surname

\_\_\_\_\_  
 Name and surname

\_\_\_\_\_  
 Date

**Please turn page for house rules.**



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### House rules:

- 1) No smoking and strong liquor will be allowed.
- 2) No pets allowed.
- 3) Please consider other guests, especially regarding noise such as the volume of the TV, radio or even your voices. We expect every guest to conduct himself/herself in such a manner that it is not disturbing to any other guests.
- 4) Adaptions to equipment may only be done by the caretaker.
- 5) No towels, linen or blankets may be taken to the beach.
- 6) No furniture or equipment in the unit may be moved or taken out.
- 7) Please rinse all sea sand at the outside shower. The indoor ablution is not adapted for that.
- 8) Please use water and electricity sparingly.
- 9) No barbeques on the stoep or inside the units.
- 10) Please be cautious when working with the curtains and blinds. Blind are to be placed horizontally and parallel when opened.
- 11) Cleaning services will be available on weekdays to clean the bathrooms and sweep the floors.
- 12) Linen will be replaced weekly.
- 13) Please use the electrical appliances strictly according to the instructions, especially the:
  - a. Washing machine
  - b. Tumble dryer
  - c. Iron
  - d. Microwave oven and
  - e. All other appliances and furniture
- 14) Please confirm your expected time of arrival and departure with the caretaker:  
**Janeen Vosloo at 072 593 1245.**
- 15) Please take note of the inventory list of the unit as you will be held liable for any breakages that has to be replaced.
- 16) Departure no later than 10:00. Arrival no earlier than 12:00.

**I hereby undertake to adhere to all the above-mentioned rules. I/we also indemnify Pro Regno Trust/Elim and its employees, trustees, agents, clients and others from any damage(s), injury, losses and/or expenses that may occur. I/we make use of the unit and all the facilities solely at my/our own risk and discretion.**

Name and surname: \_\_\_\_\_

Telephone number(s): \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_