

Airborne Adventures

Flight Voucher Order Form

Purchasers Details:

Mr / Mrs / Miss / Ms	Full Name:		
Address:			
Post Code:		Email Address:	
Telephone Number:			

Gift Receivers Details:

Mr / Mrs / Miss / Ms	Full Name:		
Address:			
Post Code:		Email Address:	
Telephone Number:			

Type of Voucher Required (Please Tick)

Trial Lessons			Pleasure Flights	
Duration	Student Only	Student + 1 Passenger	Duration	Up to 3 Passengers
Experience			20 minutes	
20 minutes			30 minutes	
40 minutes			45 minutes	
60 minutes			60 minutes	
Land Away				

Amount Paid £ _____

I enclose a cheque made payable to Airborne Adventures Headcorn Ltd
or alternatively

Please debit my Debit/Credit Card, details below

Card Type: (Switch, Visa, etc.)		Card Number:	
Expiry Date:		Issue Number: (Switch only)	
Card Holder's Signature:			

Please post Order Form to: Airborne Adventures, Headcorn Aerodrome, Headcorn, Kent, TN27 9HX