



This reservation form must be printed, signed and posted with your check or emailed with your credit card details to the address below.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone number: _____ Cell number: _____

Check-in date: _____

Check-out date: _____
(the house must be vacated by 12:00 noon on the day of check-out)

Number of guests in party: _____

Method of payment:

Check

Please send check for full rental amount. Check must be made payable to Anthony Hughes, 720 King St., Alexandria, VA, 22314
(email: INFOcasaluna@aol.com)

Credit card

Type of Credit Card: _____

Credit Card Number: _____ Security Code _____

Name on Card: _____

Expiration Date: _____

Dollar Amount: \$ _____

CANCELLATION POLICY: THIS RENTAL, UNCONDITIONALLY, IS NON-REFUNDABLE AND NON-TRANSFERABLE FOR ANY REASON.

Signature: _____

Date: _____