

Cruise Registration Form

PASSENGERS: Please PRINT

Booking Confirmation # _____

Passenger #1:

Name _____ (as it appears on your passport)

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____

E-mail Address _____

Birthdate ____/____/____ Passport number _____ U.S. Citizen? _____

Have you previously cruised? No Yes Cruise line: _____ Past Passenger Number _____

_____ I would like to pre-pay my gratuities _____ Please send me info about travel insurance

\$ _____ (\$ _____ per day) *CNTravel strongly recommends travel insurance*

Are you (check one): Male Female? Group activities? No Yes T-shirt size _____

Any special needs, please describe _____

Passenger #2:

Name _____ (as it appears on your passport)

Address _____ City _____ State _____ Zip _____

Phone _____ Cell _____

E-mail Address _____

Birthdate ____/____/____ Passport number _____ U.S. Citizen? _____

Has passenger cruised before? No Yes Cruise line: _____ Past Passenger Number _____

_____ I would like to pre-pay my gratuities _____ Please send me info about travel insurance

\$ _____ (\$ _____ per day) *CNTravel strongly recommends travel insurance*

Are you (check one): Male Female? Group activities? No Yes T-shirt size _____

Any special needs, please describe _____

Total number in party: _____ Comprised of: _____ Adults _____ Children (Ages) _____

Additional Passenger Name and DOB: _____ A or C

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CRUISE DATA:

Cruise Line _____

Departure Port: _____

Ship Name: _____

Itinerary: _____

Sail Date: _____

Total # Days: _____

Cabin Category: _____

Cabin Number: _____

Beds: _____

Dining: _____

BONUS/AMENITIES/SPECIAL: _____

Name: _____
Cruise Line: _____
Sailing Date: _____
Booking #: _____

PRICING:

Booking #:

Cruise Price: _____

1st & 2nd Passengers: _____

3rd & 4th Passengers: _____

Port Fees and Taxes: _____

Travel Protection: _____

Air/Sea City _____

Total due to Cruise Line: _____

Extras:

Group Fees: _____

Activity Fees: _____

3rd Party TPP: _____

Other: _____

Sailing Date:

Total Amount Due _____

Option Date _____

Deposit Due _____

Date Due at Line _____

Final Payment Due _____

Date due at Line _____

Air/Hotel/Transfers:

Flight #'s _____ / _____

Departure Times _____ / _____

Arrival Times: _____ / _____

Seat Assignment _____ / _____

Hotel _____ / _____

Transfers _____ / _____

PAYMENT GUIDELINES

A _____ deposit is required at the time of booking. Price includes all room and board, government taxes and fees. Gratuities and travel protection insurance not included unless otherwise noted. Certain charges are not included in the quoted price, including, but not limited to, shore excursions, souvenirs, alcoholic beverages, gambling, salon/spa treatments, photos, etc. The cruise line reserves the right to change all rates and fees without prior notice, including the implementation of a fuel service charge in the case of rising fuel prices. All bookings are subject to the cancellation policy as outlined on the cruise line website. A \$25 service fee may be charged for air reservations, transfers, cancellations and additional services.

PAYMENT INFORMATION

Name on card _____ CC# _____

Card Type _____ Exp. Date _____ Security Code _____

Billing Address _____

City _____ State _____ Zip _____

Signature _____ Date _____

Cruise Line:

FOR OFFICE USE ONLY

Reservation Date _____ Booking # _____ Deposit Amount _____ Balance due _____

CEID: _____ Cruise Booking #: _____ Logged: _____ Calendar: _____

Commission \$ due: _____ My %: _____ \$ Paid _____ Date Paid: _____

Add'l Payments: Date: _____ Method: _____ \$ Paid: _____ Balance: _____

Add'l Payments: Date: _____ Method: _____ \$ Paid: _____ Balance: _____

Add'l Payments: Date: _____ Method: _____ \$ Paid: _____ Balance: _____

Add'l Payments: Date: _____ Method: _____ \$ Paid: _____ Balance: _____

Add'l Payments: Date: _____ Method: _____ \$ Paid: _____ Balance: _____

Name: