

IMPORTANT TOUR INFORMATION REQUIRED

● **ENTER THE NAME OF THE TRIP**

● Fill out all remaining **APPLICABLE** information for each passenger, including your emergency contact information. If your tour involves a flight, be sure to fill out the airplane **SEATING PREFERENCE** section.

● **NAME:** It is important that your name appears **EXACTLY** as it is on your driver's license.

● **PASSPORT:** **All persons must hold a valid passport when leaving the United States.** This applies to Alaska, Canada, Mexico, Caribbean and all foreign destinations. You do not need a passport for Hawaii, but you will need to take a photo ID such as a driver's license.

● **EMAIL SUBMIT** button at the top right of this page.

Your passport must be valid for six months past the date you return home from your trip.

TRIP NAME:	
1ST PASSENGER NAME AS IT APPEARS ON YOUR DRIVER'S LICENSE:	2ND PASSENGER NAME AS IT APPEARS ON YOUR DRIVER'S LICENSE:
NAME AS YOU WANT IT TO APPEAR ON YOUR BADGE:	NAME AS YOU WANT IT TO APPEAR ON YOUR BADGE:
STREET ADDRESS:	STREET ADDRESS:
CITY / STATE / ZIP CODE:	CITY / STATE / ZIP CODE:
PRIMARY PHONE:	PRIMARY PHONE:
CELL PHONE:	CELL PHONE:
BED PREFERENCE: <input type="checkbox"/> 1 or <input type="checkbox"/> 2	BED PREFERENCE: <input type="checkbox"/> 1 or <input type="checkbox"/> 2
SMOKING: <input type="checkbox"/> NON SMOKING: <input type="checkbox"/>	SMOKING: <input type="checkbox"/> NON SMOKING: <input type="checkbox"/>
DATE OF BIRTH:	DATE OF BIRTH:
NAME AS IT APPEARS ON YOUR PASSPORT:	NAME AS IT APPEARS ON YOUR PASSPORT:
PASSPORT #:	PASSPORT #:
PASSPORT ISSUE DATE:	PASSPORT ISSUE DATE:
PASSPORT EXPIRATION DATE:	PASSPORT EXPIRATION DATE:
PASSPORT ISSUE COUNTRY:	PASSPORT ISSUE COUNTRY:
PASSPORT ISSUE AUTHORITY:	PASSPORT ISSUE AUTHORITY:
CITIZENSHIP: USA INDICATE IF DIFFERENT:	CITIZENSHIP: USA INDICATE IF DIFFERENT:
COUNTRY OF BIRTH: USA INDICATE IF DIFFERENT:	COUNTRY OF BIRTH: USA INDICATE IF DIFFERENT:
CHECK ONE FOR AIRPLANE SEATING PREFERENCES: AIRPLANE SEAT: WINDOW: <input type="checkbox"/> COMPANION: <input type="checkbox"/> AISLE: <input type="checkbox"/> BE AWARE: IF YOU AND YOUR COMPANION BOTH MARK WINDOW or COMPANION YOU WILL NOT BE SEATED TOGETHER. <i>SEATING PREFERENCE NOT GUARANTEED!</i>	CHECK ONE FOR AIRPLANE SEATING PREFERENCES: AIRPLANE SEAT: WINDOW: <input type="checkbox"/> COMPANION: <input type="checkbox"/> AISLE: <input type="checkbox"/> BE AWARE: IF YOU AND YOUR COMPANION BOTH MARK WINDOW or COMPANION YOU WILL NOT BE SEATED TOGETHER. <i>SEATING PREFERENCE NOT GUARANTEED!</i>
SPECIAL DIETARY NEEDS:	SPECIAL DIETARY NEEDS:
IF YOU HAVE CRUISED BEFORE, WHAT CRUISE LINE?:	IF YOU HAVE CRUISED BEFORE, WHAT CRUISE LINE?:
CRUISE LINE PASSENGER #:	CRUISE LINE PASSENGER #:
EMERGENCY CONTACT INFORMATION:	
CONTACT NOT TRAVELING WITH YOU:	CONTACT NOT TRAVELING WITH YOU:
RELATIONSHIP TO PASSENGER:	RELATIONSHIP TO PASSENGER:
CONTACT ADDRESS:	CONTACT ADDRESS:
CITY / STATE / ZIP CODE:	CITY / STATE / ZIP CODE:
HOME PHONE: WORK PHONE: CELL PHONE:	HOME PHONE: WORK PHONE: CELL PHONE: