



Adventure Awaits World Travel
Client Information Cruise Booking Form

Please download, fill in, save, then email back to Jackie@adventureawaitsworldtravel.com

First Passenger in the stateroom:

Name as it appears on your passport (first, middle and last): _____

Date of Birth: _____

Passport # (it is a 9 -digit number on the upper right on your picture page): _____

Home Address: _____

Phone number: _____

Email: _____

Second Passenger in the stateroom:

Name as it appears on your passport (first, middle and last): _____

Date of Birth: _____

Passport # (it is a 9-digit number on the upper right on your picture page): _____

Home Address: _____

Phone number: _____

Email: _____

(Please note: if you have a third and/or fourth passenger in your cabin, please complete a second form with their information on it. Thank you!)

Ship and Sail Date: _____

Departure Port: _____

Preferred Cabin category (please review Cabin Category Table with cabins, location, size and pricing): _____

Will you be celebrating any special occasions on this cruise? _____

If so, please state what you will be celebrating and date: _____

Do you have any dietary restrictions? If so, please list them here: _____

Please list any allergies here: _____

Are you a member of the cruise line's loyalty program? (YES/NO) _____

If so, write your loyalty number here please: _____

Anyone in your party a current or former member of the military? (YES/NO) _____

Will you be using assistive equipment (wheelchair, walker, C-Pap, etc.) on this trip? (YES/
NO) _____

If yes, please describe the equipment you will be using: _____
