

ABOUT CRUISIN' & TOURIN'
1345 GARNER LANE, SUITE 304, COLUMBIA, S.C. 29210
(803)731-4894(PHONE) - (803)731-2015(FAX)

CLIENT INFORMATION FORM

****FOR 6 & 7 NIGHT CRUISES ****ONE PER PERSON****

ALL!! MUST BE COMPLETED IN ORDER TO GAURANTEE SPACE!

MUST MAKE & KEEP YOURSELF COPY OF THIS FORM PRIOR TO TURNING IN!*

NAME SPELLING MUST BE IDENTICAL TO YOUR PASSPORT!!

STREET ADDRESS CITY STATE
ZIP CODE AREA/HOME PHONE AREA/WORK PHONE MALE OR FEMALE

GROUP LEADER: _____ (OR HOW YOU LEARNED ABOUT THE TRIP)!!
DATE OF TRIP: _____ COST OF TRIP: _____ NAME OF SHIP: _____
PERSON ROOMING WITH: (1 ONLY!) _____
INSIDE OR OCEANVIEW CABIN: _____ (CATEGORY OR TYPE OF ROOM)
DATE OF BIRTH (month / day / year): _____ E-MAIL ADDRESS: _____
DINING PREFERENCE: (EARLY) _____ (LATE) _____ (WITH GROUP) _____
CARNIVAL'S CANCELLATION INSURANCE: YES _____ NO _____ (READ BACK OF BOOK).
ALL PASSENGERS MUST BE 21 YEARS OF AGE OR TRAVELING IN PARENTS ROOM!!!!!!
CARNIVAL RESERVES THE RIGHT TO ADD FUEL SUPPLEMENT TO ALL PASSENGERS COST!!!!

FIRST DEPOSIT NON-REFUNDABLE IF CANCELLED FOR ANY REASON!!!!!!!!!!
FIRST DEPOSIT NON-TRANSFERABLE AND OR CANNOT CHANGE NAME!!!!!!!!!!
IF CANCELLED BETWEEN DAYS BELOW!!! STATED PENALTIES APPLY!!!!!!!!!!
FINAL PAYMENT DATE ON FLYER TO 40 DAYS PRIOR TO SAILING (\$250.00)LOSS!!!!!!!!!!!!!!
39 DAYS TO 18 DAYS PRIOR (\$500.00) LOSS***17 DAYS OR LESS *** NO REFUNDS***!!!!!!!!!!!!!!
WE STRONGLY RECOMMEND THE PURCHASE OF CANCELLATION INSURANCE!!!!!!!!!!!!!!
ALL REFUNDS WILL BE MAILED BACK TO CUSTOMER NO LATER THAN DATE OF CRUISE!!!!!!
ALL CANCELLATIONS MUST BE IN WRITING TO TRAVEL AGENCY BY FLYER DEADLINE!!!!!!!!!!
CANCELLATION LETTERS MUST BE SENT RETURN RECEIPT IN ORDER TO HAVE PROOF SENT!!
IF PAYMENT DEADLINES MISSED ROOM WILL POSSIBLY BE LOST (WILL BE ON REQUEST)!!!!!!
NO CHANGES OF ANY KIND WILL BE ALLOWED AFTER FINAL PAYMENT DEADLINE!!!!!!!!!!!!!!

PAYMENTS CAN BE MADE ALONG THE WAY AND ARE HIGHLY RECOMMENDED
IF MAKING PAYMENTS KEEP TRACK OF IN ORDER TO HAVE YOUR BALANCE HANDY
***REMEMBER YOU MUST!!!!!!!!!! HAVE YOUR PASSPORT TO BOARD THE SHIP!!

IF USING CREDIT CARDS YOU MUST FIRST FILL OUT ALL THE INFORMATION BELOW!!!!!!!!!!
CANNOT CHARGE FIRST \$250.00 OF COST TO ANY CREDIT CARD - ONLY BALANCE DUE!!!!!!
CHARGES CAN ONLY BE FOR TRAVELING CARD HOLDER AND IMMEDIATE FAMILY !!
AMOUNT TO CHARGE MY CARD \$ _____ CARD # _____ EXP: _____
I CERTIFY THAT ALL THE ABOVE INFORMATION IS CORRECT: X _____
(SIGNATURE REQUIRED ON EVERY FORM!!!!!! OR CRUISE IS NOT CONFIRMED!!!!!!)