

# SEA MAGIC Cruise Registration Form

Individual Booking # \_\_\_\_\_

**COMPLETE ALL SECTIONS #1-5; ACCEPT OR DECLINE INSURANCE**

1. *Legal Last Name (passenger 1)		*Legal Last Name (passenger 2)	
*Legal First Name Middle		*Legal First Name Middle	
Name you prefer to be called		Name you prefer to be called	
Date of Birth		Date of Birth	
Address		Address	
City, State, Zip		City, State, Zip	
Phone (home) (cell)		Phone (home) (cell)	
Email:		Email:	
<input type="checkbox"/> Male	<input type="checkbox"/> Single	<input type="checkbox"/> Male	<input type="checkbox"/> Single
<input type="checkbox"/> Female	<input type="checkbox"/> Married	<input type="checkbox"/> Female	<input type="checkbox"/> Married
Citizenship Country	Country of Birth	Citizenship Country	Country of Birth
Passport #	Issue Date	Passport #	Issue Date
Issuing Authority	Expire Date	Issuing Authority	Expire Date
Emergency Contact Person - Name		Relationship	Phone
Address, City, ZIP			

**Destination: Coastal California Getaway**  
**Sail Date: January 22-27, 2020**  
**Ship: Grand Princess**  
**Group: Michelle's Dance Group (TPR/A003)**  
*\*\*\*Must be booked through Paradise Travel\*\*\**  
**Reservation & Contact Information**  
 Send Registration Form with credit card info (or check) to:  
**Michelle Kinkaid** (Travel Agent & Group Leader)  
 671 Athens St., San Francisco, CA 94112  
 Phone: 415-802-3325  
 Email: michellekinkaid5678@gmail.com  
 Web: www.michelledance.com/events.html  
*(see website for cruise details)*

**Cruise Documents Required\* & Info**  
**\* Passport required - must be valid for 6 months past the cruise return date**  
 \*If you have a non-U.S. Passport, please verify any documents that are required with your Consulate.  
 Your registered name for the cruise & the name on your Passport **must match exactly - no exceptions!** This is a U.S. & International law. Failure to provide correct information and documentation can result in denied boarding.  
**Info**  
 \*Cruise rates are subject to change.  
 \*We highly recommend having Travel Insurance

**2. Cruise Fees\*** (cruise only-per person/dbl occupancy, port charges) + tax & fees

Select Cabin Type:	*Rate (from)	Psg #1	Psg #2
<input type="checkbox"/> Mini Suite Cabin	pp		
<input type="checkbox"/> Balcony Cabin	pp		
<input type="checkbox"/> Outside Cabin	pp		
<input type="checkbox"/> Outside Cabin-obstructed	pp		
<input type="checkbox"/> Inside Cabin	pp		
<input type="checkbox"/> Single person in cabin --\$rate>	pp		
<input type="checkbox"/> 3rd person in cabin -- \$rate>	pp		
<input checked="" type="checkbox"/> <b>Tax &amp; Government Fees</b>	pp	\$175.00	\$175.00
<input type="checkbox"/> Vacation Protection Insurance Std/Plat	pp		
<input type="checkbox"/> Cruise Bus Transfers: \$58 rt / \$29 ow; A>S, S>A	pp		
<input type="checkbox"/> Airfare (from city):	pp		
<input type="checkbox"/> Date: Dep & Return	pp		
<input checked="" type="checkbox"/> <b>Group Fee/Other:</b>	pp	\$75.00	\$75.00
<b>Total Amount Due</b>		\$	\$

**3. Cruise Details**

a) Sharing Cabin with: \_\_\_\_\_  
*Write cabinmate name here if using a separate form.*

b) Request Area or Cabin # \_\_\_\_\_

c) Have you sailed with Princess before? Yes / No  
 If you are a past passenger, P1 # \_\_\_\_\_  
 List Past Passenger Number P2 # \_\_\_\_\_

d) Dining:  \*2nd (7:15pm)  1st (5pm)  Anytime  
**\*Note: Group dining time is typically 2nd (Please verify)**

e) Bed Configuration:  2 Twins  1 Queen

f) Complimentary upgrade if available  Yes  No

**4. Vacation Protection Insurance**

<b>Check one</b> <input type="checkbox"/> Accept <input type="checkbox"/> Decline	Insurance Cost is % of Cruise Fare
	<input type="checkbox"/> -Standard Care @ 8% <input type="checkbox"/> -Platinum Care @ 12% (see princess website for coverage details)

\*Promotional pricing is non-refundable

**Deposit** (Standard deposit 20%)      **Final Payment (by 11/4/19)**

\$ \_\_\_\_\_ usd      \$ \_\_\_\_\_ usd

Payment method (CC / Check / Cash / FCD)      Payment method (CC / Check / Cash)

**Please Note: Cancellation Fee is \$100 to Michelle K/Agency plus any fees imposed by the Cruise Line. Change fees apply @ \$25 per change. Rates & details subject to change.**

Authorized Signature (Passenger #1)  
 \_\_\_\_\_  
 Authorized Signature (Passenger #2)  
 \_\_\_\_\_

**5. Credit Card Information**

M/C    Visa    AmEx    Discover

CC# \_\_\_\_\_

Exp Date: \_\_\_\_\_ Security Code \_\_\_\_\_

Name as it appears on your credit card  
 Name \_\_\_\_\_  
 Billing Address \_\_\_\_\_  
 Same as above \_\_\_\_\_

Subject to change 00-CruiseRegForm-2020-Coastal-5.xlsx (C20191020)