

# Sea Magic Cruise Registration Form

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

**\*COMPLETE ALL SECTIONS #1-6 & 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: Pacific Coastal Getaway**  
**Sail Date: April 11-16, 2022**  
**Ship: Ruby Princess**  
**Group: Sea Magic Getaway 5D** (TNW/R209)  
*\*\*\*Must be booked through Paradise Travel\*\*\**  
**Reservation & Contact Information**  
 Send Registration Form with credit card info 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 strongly recommended - 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 and 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.  
 \*Cruise rates are subject to change  
 Travel Insurance is highly recommended  
 Completing this form accepts Cruise Passage Contract

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

Select Cabin Type:	Fare Type: Saver / Plus	Psgr #1	Psgr #2
<input type="checkbox"/> Suite Cabin	pp		
<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		
Single person suppliment Rate	pp		
3rd person in cabin	pp		
<input checked="" type="checkbox"/> Tax & Government Fees	pp	\$175.00	\$175.00 usd
<input type="checkbox"/> Vacation Protection Insurance Std / Plat	pp		
Cruise Bus Transfers: \$68 rt / \$34 ow	pp		
Airfare (from city):	pp		
Date: Dep & Return	pp		
<input checked="" type="checkbox"/> Group Fee	pp	\$50.00	\$50.00
<b>Total Amount Due</b>		\$	\$ usd

**3. Cabin Details**

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

b) Request Ship Area, Deck, Cabin # \_\_\_\_\_

c) Have you sailed with Princess before? \_\_\_\_\_  
 List Captain's Circle # P1 # \_\_\_\_\_  
 P2 # \_\_\_\_\_

d) Bed Configuration:  2 Twins  1 Queen

e) Complimentary upgrade if available  Yes  No

**4. Fare Type:**  Princess Plus  Saver

**5. Vacation Protection Insurance**

**Check one**  
 Accept  
 Decline

Insurance Cost is % of Cruise Fare  
 -Standard Care @ 8%  
 -Platinum Care @ 12%  
*(see princess website for coverage details)*

\*Deposit & details may vary with Promotions

**Deposit** (Standard deposit 20%) \$ \_\_\_\_\_ usd  
 Payment method (CC / FCD) \_\_\_\_\_

**Final Payment (by 1/20/22)** \$ \_\_\_\_\_ usd  
 Payment method (CC / FCC) \_\_\_\_\_

**NOTE:** Agency may assess \$100 Cancellation/Processing Fee in addition to fees imposed by Cruise Line. Change fees may apply: \$25/change after booking. Rates/Details subject to change. I accept Cruise Passage Contract.

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

**6. 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 \_\_\_\_\_