

CRUISE RESERVATION REQUEST GROUP/SCHOOL INFORMATION

PLEASE PRINT LEGIBLY

SCHOOL/GROUP NAME: _____

TYPE OF GROUP: DANCE BAND CHOIR ORCHESTRA

 CHEERLEADERS SENIOR CLASS ADULT/FAMILY

 OTHER _____

DIRECTOR/ADVISOR: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL: _____ FAX: _____

E-MAIL ADDRESS: _____

SAILING DATE: _____ SHIP: _____ NO. TRAVELING: _____

PERFORMANCE / WORKSHOP OPPORTUNITIES

PERFORMANCE

- YES, Group would like to perform onboard ship
- NO, Group would NOT like to perform onboard ship

WORKSHOP/FESTIVAL

- YES, Group would like to include the Workshop for an additional \$35.00 per person.
- YES, Group would like to include the Festival for an additional \$35.00 per person.

TRAVEL COMPANY INFORMATION

TRAVEL/TOUR COMPANY: _____

CONTACT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ CELL: _____ FAX: _____

E-MAIL ADDRESS: _____