

"Future" Cruise - Request Form

Please complete to fill out below Please print clear to read. (If your roommate has different address, then he / she has to fill out separately form)

I'm interested in: Please Check a	II that apply: (can be n	more than	one)		
Cruise			Cruise		
Japan (10 night)			Bahamas (4 night)		
Other:			Other:		
Your Name (First & Last):	ME MUST RE	MATCHED YOUR PASSPORT RO	OK) M	ale Female
Birth Date (mm-dd-yyyy)					
Street Address:			Apt / Unit / Lot #		
City: State:			Zip:		
Your Email:					
Your Roommate's Nam	e (First & Last):				
Spouse / Partner Boy/Girlfriend / Fiancé (same address)		Fiancé	Friend / Family (same address)	☐ Not Yet, looking for one	No roommate, I prefer to be alone
I'm interested of type o	f cabin: (your preferen	ice)			
☐ Inside ☐ Ocean	nview Balcony	☐ Othe	er:		_
Type of Bed:					
	Beds together as a King	g Bed			
	Payn	nent & C	Cancellation Policy	<i>l</i>	
Payment:	_		_		
\$100.00 per person de oceanview or standard					
FOR PERSONAL CHECO	•				MARIA & BOBBY'S

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Maria & Bobby's Deaf Travel's Cancellation Fees:

There is no cancellation fee while we are waiting for the cruise rates.