

ROYAL CARIBBEAN ANTHEM of the SEAS SAILING the NORWEGIAN FJORDS 07/12/2024

CLIENT INFORMATION FORM



Clearly print your full name (first/middle/last) as it appears on your government issued travel document. Mark blanks N/A if the information does not apply to you. Blanks with a ★ are required information. IMPORTANT: In order to avoid any unnecessary change fees, it is imperative that all guest names are correct when booked. The information below must be the legal name and be 100% identical to your ID.

Passports must be valid for at least 6 months after your cruise. Green cards and Enhanced WA Drivers Licenses are acceptable for entry into Canada. Non-US citizens, check with your embassy to see if a visa is required.

PASSENGER 1

★First: _____ Middle: _____ Last: _____ Suffix: _____
Name you go by: _____ ★ Gender: Male Female ★Date of Birth: (MM/DD/YYYY) _____
★Phone: _____ ★ Email: _____
★Street Address: _____
★City: _____ State: _____ Zip Code: _____
★Passport or Green Card Number: _____ Issue Date _____ Expiration Date _____
★Country of Issue: _____★I prefer Inside Cabin Outside Cabin Balcony Cabin
Should you become ill or injured, whom should we contact (person not traveling with you):
★Emergency Contact Name: _____★Phone: _____
Email Address: _____

PASSENGER 2 (If you do not have roommate yet, mark the name blanks N/A. Call us with a name as soon as possible.)

★First: _____ Middle: _____ Last: _____ Suffix: _____
Name you go by: _____★Gender: Male Female ★Date of Birth: (MM/DD/YYYY) _____
★Phone: _____ ★Email: _____
★Street Address: _____
★City: _____ State: _____ Zip Code: _____
★Passport or Green Card Number: _____ Issue Date _____ Expiration Date _____
★Country of Issue: _____
Should you become ill or injured, whom should we contact (person not traveling with you):
★Emergency Contact Name: _____★Phone: _____
Email Address: _____

FLIGHT INFO:

We can help you book flights, or you can book your own. Boarding begins at 1:00 pm. Passengers must be onboard no later than 3:00pm. Return flights out of Seattle should not be before 12:00 pm.

TRAVEL PROTECTION is Highly Recommended and a quote will be included on your invoice.

★ Yes, I wish to purchase travel protection No, I decline insurance.

Please return this Client Information Form by mail or email:

Admiral of the Fleet® Cruise Center - 14400 NE Bel-Red Rd Ste. 103 - BELLEVUE, WA 98007-3952
Email: cruises@admiralcruises.com or melanie@admiralcruises.com

PLEASE CALL WITH A CREDIT CARD DEPOSIT: 425-644-7447

★Signature: _____ Date: _____

Comments: _____