

The Rhine and Moselle River Cruise June/July 2024

Please check if you are also interested in the extension to Normandy _____

*****PLEASE ENSURE THAT ALL NAMES ARE AS THEY APPEAR ON YOUR PASSPORT.**

SURNAME: _____

FIRST: _____ **MIDDLE:** _____ **Mr / Mrs / Ms / Miss**

ADDRESS: _____

CITY/PROV/STATE: _____ **POSTAL/ZIP CODE:** _____

PHONE (h): _____ **(b):** _____ **(cell):** _____

EMAIL: _____

BIRTHPLACE (CITY, STATE, COUNTRY): _____

DATE OF BIRTH (Month): _____ **(Day):** _____ **(Year):** _____

NATIONALITY: _____ **PASSPORT #:** _____

ISSUED DATE: _____ **EXPIRY DATE:** _____

EMERGENCY CONTACT: _____

PHONE: _____ **RELATIONSHIP:** _____

AIRLINE POINTS PROGRAM & NUMBER: _____

SEAT PREFERENCE: _____ **SMOKING/NONSMOKING:** _____

BEDDING REQUESTED: Single Room 2 Beds 1 Bed **SHARING WITH:** _____

KNOWN MEDICAL CONDITIONS OR DIETARY REQUIREMENTS: _____

ARE YOU CELEBRATING A SPECIAL EVENT? (i.e. Anniversary) _____

Please Fax or Email form to: Carol Petersen, Expedia Cruises, West Vancouver
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Vancouver Area (604) 947 9005 Toll Free (866) 949 3007