

CRUISE BOOKING FORM

Cruise, stateroom and primary contact information



CRUISE REQUEST

SHIP

SAILING DATE

DEPARTURE PORT

ITINERARY / DESTINATIONS

NUMBER OF NIGHTS

STATEROOMS

STATEROOM PREFERENCES

CATEGORY

- ☐ Interior
 ☐ Ocean View
 ☐ Balcony
 ☐ Suite
 ☐ Best value available

ROOM ASSIGNMENT

- ☐ Choose a room
 ☐ Guarantee category
 ☐ No preference

ROOM FEATURES

- ☐ Connecting rooms required
 ☐ Accessible room required
 ☐ Prefer near elevator

LOCATION

- ☐ Forward
 ☐ Midship
 ☐ Aft
 ☐ No preference

PREFERRED DECK

MAXIMUM TOTAL BUDGET

OTHER CABIN REQUESTS

PRIMARY CONTACT

PRIMARY CONTACT NAME

MOBILE PHONE

EMAIL ADDRESS

BEST TIME TO CONTACT

STREET ADDRESS

CITY

STATE

ZIP / POSTAL CODE

PREFERRED CONTACT

- ☐ Phone
 ☐ Text
 ☐ Email

HOW DID YOU HEAR ABOUT HAPPY DAYZ TRAVEL?

Privacy: Do not enter credit-card numbers, Social Security numbers, passport numbers or upload ID images on this form. Payment details must be submitted through the separate secure credit-card authorization process.

TRAVELER INFORMATION

Guests 1-3 - legal names must match travel identification

GUEST 1 Primary traveler / booking contact

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ Past guest☐ Passport☐ Birth certificate + photo ID☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

GUEST 2

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ Past guest☐ Passport☐ Birth certificate + photo ID☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

GUEST 3

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ guest☐ Passport☐ Birth certificate + photo ID☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

TRAVELER INFORMATION

Guests 4-6 - legal names must match travel identification

GUEST 4

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ Past guest

☐ Passport

☐ Birth certificate + photo ID

☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

GUEST 5

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ Past guest

☐ Passport

☐ Birth certificate + photo ID

☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

GUEST 6

FULL LEGAL NAME - EXACTLY AS SHOWN ON ID

DATE OF BIRTH

SEX / GENDER

CITIZENSHIP

STATE / COUNTRY OF RESIDENCE

GUEST NUMBER

☐ Past guest

☐ Passport

☐ Birth certificate + photo ID

☐ Other document

RELATIONSHIP TO PRIMARY TRAVELER / MINOR'S GUARDIAN

RATE ELIGIBILITY - MILITARY, RESIDENT, CASINO, ETC.

CRUISE PREFERENCES

Dining, protection, accessibility and special requests

DINING AND ONBOARD PREFERENCES

DINING CHOICE

☐ Early assigned dining ☐ Late assigned dining ☐ Your Time Dining ☐ No preference

BED ARRANGEMENT

☐ King / together ☐ Twin / separate ☐ Prepay gratuities ☐ Do not prepay

OTHER BOOKINGS / NAMES THAT SHOULD DINE WITH THIS PARTY

VACATION PROTECTION

☐ Please provide a quote ☐ Client intends to accept ☐ Client intends to decline

Final acceptance or declination must be documented separately before payment is processed.

ACCESSIBILITY, DIETARY AND MEDICAL EQUIPMENT

☐ Accessible cabin ☐ Wheelchair / scooter ☐ CPAP or medical device ☐ Dietary request

ASSISTANCE OR ACCOMMODATION NEEDED

DIETARY RESTRICTIONS / FOOD ALLERGIES

Only provide the type of assistance needed here. Send confidential medical documents through an approved secure channel.

CELEBRATIONS AND LINKED TRAVEL

☐ Birthday ☐ Anniversary ☐ Honeymoon ☐ Other

CELEBRATION NAME AND DATE

LINKED BOOKING NUMBERS / OTHER TRAVELING PARTIES

FLIGHT, HOTEL OR TRANSFER NOTES

EMERGENCY CONTACT - NOT TRAVELING

NAME

RELATIONSHIP

PHONE

QUOTE SUMMARY & AUTHORIZATION

Agent-use pricing summary and client approval

AGENT QUOTE SUMMARY

SHIP

SAIL DATE

CABIN CATEGORY

CABIN NUMBER / GUARANTEE

FARE / RATE CODE

QUOTE EXPIRES

PRICE AND PAYMENT SCHEDULE

CRUISE FARE

TAXES / REQUIRED FEES

PREPAID GRATUITIES

TRAVEL PROTECTION

TOTAL VACATION PRICE

DEPOSIT DUE

DEPOSIT DATE

FINAL PAYMENT DATE

Prices and availability can change until cruise line confirms the reservation and receives the required deposit. Credit-card details must be submitted using Happy Dayz Travel's separate secure authorization form.

CLIENT ACKNOWLEDGMENTS

- ☐ Traveler names and birth dates are correct and match the identification they will use.
- ☐ Each traveler is responsible for carrying the identification, citizenship documents and visas required for the itinerary.
- ☐ The ship, sailing date, stateroom category, occupancy and room arrangement shown above are approved.
- ☐ The quoted price, deposit, final-payment date and applicable cancellation terms have been reviewed.
- ☐ Travel protection has been offered; acceptance or declination will be documented separately.
- ☐ Changes after booking may result in price changes, penalties or loss of the selected stateroom.

CLIENT COMMENTS OR BOOKING CONDITIONS

AUTHORIZATION

CLIENT TYPED SIGNATURE

DATE

TRAVEL ADVISOR

CONFIRMATION NUMBER