

Ship: Carnival "TRIUMPH" Sail Date: 5/1/2014 Attn: RAY SCHUTTERNumber of Persons in Cabin Early Dining ~6:15 Late Dining ~ 8:15Type of Room Interior Ocean View Balcony Suite

Fill out an application for each room. Enter all names in this cabin on this application. Use additional form if more than 2 persons are in the room

A Passport valid until after 11/8/2014 is required to take this cruise.RETURN THIS FORM WITH YOUR DEPOSIT + COLOR COPIES OF YOUR PASSPORTS**Please include all phone numbers and especially your e-mail.**

Circle one: MR / Mrs / Miss / Mstr Passport Name: (First / Middle / Last) _____ Birth Date: _____

Citizenship: _____ I have applied for a passport and will FAX a color copy when available.

Passport Number: _____ Date Issued: _____ Date Expires: _____

Emergency Contact: _____ Relationship: _____ Phone: _____ Day _____ Night _____

Your Address: _____ Your Rotary Club : _____

Your City: _____ State: _____ Zip: _____

Home Phone: _____ I am a Military Vet / Fire Fighter / Policemar (circle one)Cell Phone: _____ First Time With This Cruise Line Past passenger on Carnival

Work Phone: _____ Medical / Diet Request : _____

E-Mail: _____

 Yes Insurance No Insurance Signature if declining Insurance: _____ I will need air fare. I will need transfers to the ship @ \$30 pp Prepaid gratuities of \$46 per person (included in picing.)

Charge my payments to this Credit Card: _____ Expires: _____ Security: _____

Credit Card Signature: _____

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Credit Card Signature: _____

Payments

Date Amount Check # Payor

Enclosed is my check for my deposit: _____

Mail with a color copy of your passport - or- FAX with a color copy of your passport to Ray Schutter:**West University Travel, 3622 University Blvd, Houston, TX 77005**