



## Registration Confirmation

INSIDE CABIN (6V)

OCEANVIEW (6N)

BALCONY (E2)

**(Please give legal name on picture ID)**

**ALL passengers are recommended to have a PASSPORT or Original Raised Seal Birth Certificate with a government issued ID.**

1<sup>st</sup> PASSENGER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

2<sup>nd</sup> PASSENGER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

3<sup>rd</sup> PASSENGER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

4<sup>th</sup> PASSENGER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ Emergency # \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

### DEPOSIT AMOUNT

ENCLOSED: \$ \_\_\_\_\_ Travel Insurance: Yes No  
Travel insurance optional: per person/medical and cancellation included

**MAKE CHECKS/MONEY ORDERS PAYABLE TO: ROBINSON CRUISE PLANNERS Attn: ZORA 2019**

MasterCard VISA American Express Discover

CREDIT CARD NUMBER: \_\_\_\_\_ EXP. \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CARDHOLDER

I authorize Robinson Cruise Planners to use this credit card for payment towards the sailing referenced above.

**ROBINSON CRUISE PLANNERS • 2747 Wentworth Place • Cocoa, FL 32922  
Toll Free (866) 632-8724 FAX: (321) 639-9917 • E MAIL: rcptm@bellsouth.net**