



Dance Cruise Registration Form

7 Day Dance Cruise – Italy, Greek Isles, Croatia - July 21-28, 2008 on Costa Fortuna from Venice
PLEASE PRINT CLEARLY OR TYPE (For Word version request by email)

Today's Date:				
SUBMIT REGISTRATION FORM BY MAIL, PDF OR FAX - With Check or Credit Card				
Legal Name: Must appear as it will appear on your boarding documents (i.e. passport) Passports are required 1/1/2008.				
First Name		Middle Name		Last Name
Address				
City		State	Zip Code	Country:
Home Phone		Work Phone		Cell Phone
Email Address			Website:	
Date of Birth		Citizenship		<input type="checkbox"/> Male <input type="checkbox"/> Female
Name as you would like it to appear on your name badge:				
Emergency Contact Name for Cruise Ship (Not sailing with you)				Relationship
Home Phone		Work Phone		Cell Phone
PAYMENT INFORMATION:				
Make Checks payable to Sundancer Cruises or send Credit Card Form below				
Type of Credit Card (MasterCard, Visa, or Discover)				Expiration Date
Your name as it appears on the credit card:				
Credit Card Number:				
CABIN MATE INFORMATION (If above information is different Cabin Mate must fill out separate form)				
Legal Name: Must appear as it will appear on your boarding documents (i.e. passport)				
Cabin Mate's First Name			Cabin Mate's Last Name	
Relationship:		Date of Birth	Citizenship	<input type="checkbox"/> Male <input type="checkbox"/> Female
Type of Cabin	<input type="checkbox"/> Inside Cabin	<input type="checkbox"/> Ocean View	<input type="checkbox"/> Private Balcony	<input type="checkbox"/> Private Suite
Occupancy	<input type="checkbox"/> Single Occupancy	<input type="checkbox"/> Double Occupancy	<input type="checkbox"/> Triple Occupancy	<input type="checkbox"/> Quad Occupancy
REFERRAL INFORMATION				
How did you hear about the cruise?			Or, Referred By (Name): Don & Lizette Hopkins / 916-595-Shoe (7463) Email: dancer@danceglitz.com Website: www.danceglitz.com	
If by internet search please list website:				
Past Cruiser Number with this Cruise Line:			Past Sundancer Cruiser <input type="checkbox"/> Yes <input type="checkbox"/> No	
Passport No.		Date Issued	Place Issued:	Expiration Date

LIMITED NUMBER OF CABINS AT THESE PRICES –FIRST COME – DON'T WAIT UNTIL DEPOSIT DEADLINE !

Cathy Diegel Paxton of Sundancer Cruises, Inc.
 Phone: 303-250-7344 in Colorado or Toll Free at 1-866-409-SAIL (7245)
 Fax: 303-284-0983 (Dedicated line on 24/7)
 E-Mail: info@SundancerCruises.net • Website: www.SundancerCruises.net

Send your registration to: Sundancer Cruises, Inc., 8401 Gray Street, Arvada, CO 80003-1331
Make checks payable (US Funds) to: Sundancer Cruises, Inc. or we accept MasterCard, Visa & Discover

<p><u>CANCELLATION PENALTIES IF CANCELLED BY PASSENGER:</u> No cancellation fee within 5 calendar days of booking \$50 fee after 5 days of booking and before final payment deadline \$100 fee after Final Payment deadline Forfeit Deposit –\$500.00 30 days before sailing No refund 7 days before sailing or "No Show"</p>
