



## Dance Cruise Registration Form

**7 Night Western Caribbean Dance Cruise – February 25 – March 4, 2011 on Costa “Atlantica” from Miami**

PLEASE PRINT CLEARLY OR TYPE (For Word version request by email)

<b>SUBMIT REGISTRATION FORM BY MAIL, PDF OR FAX - With Check or Credit Card</b>				
<b>Legal Name Must appear as it will appear on your boarding documents (i.e. passport) Passports are required</b>				
First Name		Middle Name or Initial (as on passport)		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				
Passport No.		Date Issued	Expiration Date	Place Issued
Past Cruiser Number with this Cruise Line		<input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, what ship and sail date:
Past Sundancer Cruiser		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Emergency Contact Name for Cruise Ship (Not sailing with you)				Relationship
Home Phone		Work Phone		Cell Phone
<b>PAYMENT INFORMATION - Make Checks payable to Sundancer Cruises or send Credit Card Form below</b>				
Type of Credit Card:		<input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover <input type="checkbox"/> Check here if Debit Card		Expiration Date
Your name as it appears on the credit card				
Credit Card Number			3 Digit CVC Code on Back	
Billing address if different than above address			Billing Zip if different than above address:	
<b>CABIN MATE INFORMATION (If above information is different Cabin Mate must fill out separate form)</b>				
<b>Legal Name Must appear as it will appear on your boarding documents (i.e. passport)</b>				
Cabin Mate's First Name		Cabin Mate's Middle Name or Initial (as on passport)		Cabin Mate's Last Name
Badge Name			Relationship	
Email Address			Phone No(s)	
Date of Birth		Citizenship		<input type="checkbox"/> Male <input type="checkbox"/> Female
Passport No.		Date Issued	Expiration Date	Place Issued
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
<b>REFERRAL INFORMATION</b>				
How did you hear about the cruise?			Or, Referred By (Name) <a href="http://www.PulseMaine.com">www.PulseMaine.com</a> 207-899-1435	
If by internet search please list website				
<b>Today's Date</b>				

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

Cathy & Brent 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](mailto:info@SundancerCruises.net) • Website [www.SundancerCruises.net](http://www.SundancerCruises.net)

Send your registration to Sundancer Cruises, Inc., 8401 Gray Street, Arvada, CO 80003-1331  
 Deposit \$375 for 7 day cruises (per person)

Make checks payable (US Funds) to Sundancer Cruises, Inc. or we accept MasterCard, Visa & Discover

**CANCELLATION PENALTIES IF CANCELLED BY PASSENGER**

No cancellation fee within 5 calendar days of booking  
 \$50 fee after 5 days of booking and before final payment deadline - Forfeit Deposit after Final Payment deadline  
 50% penalty – 30 days prior to sailing - No refund 7 days before sailing or "No Show"