



Dance Cruise Registration Form

- 9 Night Southern Caribbean Dance Cruise – January 23 – February 1, 2009 on NCL “Jewel” from Miami
- 14 Night Southern Caribbean Dance Cruise – January 23 – February 6, 2009 on NCL “Jewel” from Miami

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					
First 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	
Passport No.		Date Issued	Place Issued		Expiration Date
PAYMENT INFORMATION - Make Checks payable to Sundancer Cruises or send Credit Card Form below					
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 is different that above address					
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		
Badge Name:			Relationship		
Date of Birth		Citizenship		<input type="checkbox"/> Male <input type="checkbox"/> Female	
Passport No.		Date Issued	Place Issued		Expiration Date
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)		
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		

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 • Website www.SundancerCruises.net

Send your registration to Sundancer Cruises, Inc., 8401 Gray Street, Arvada, CO 80003-1331
Deposit \$500.00 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
 \$100 fee after 5 days of booking and before final payment deadline
 Forfeit Deposit –\$500.00 after Final Payment deadline
 50% penalty forty five days before sailing
 No refund 7 days before sailing or “No Show”