



Cruise Information Form
6918 Corporate Dr. Suite B4 Houston TX. 77036
(713) 541-1000 Office (713) 541-1954 Fax

TRAVEL PERSONAL INFORMATION

Legal name: First _____ Last _____ Middle Initial _____

Address: Street _____ City _____ State _____ Zip code _____

Home Telephone: _____ Other Telephone: _____

E-mail: _____ Date of Birth#: _____

Event Name _____

Cabin Category: _____ (1st Choice) Cabin Category: _____ (2nd Choice)

Estimated Total Price: _____ Is this with a Quad or Triple? Yes No

If Yes, Who are the other Passengers? _____

Do you have a passport to leave the United States? Yes No

Have you been on a cruise Before? Yes No

Do you have a preferred Roommate? Yes No If Yes Who? _____

Do you have any special needs ? Yes No If Yes What? _____

Payment Options: Cash Check Charge Other Total Amount Due: _____

Credit Card Authorization Form

Please fill out the form and fax back to **(713) 541-1954**.

 Last Name First Name Card Type (VISA, MC, Discover, AMEX, etc.)

 Credit Card # CVV2/EIN# Expiration Date (MM/YY)

 Billing Address City State Zip Code

By signing this form, I understand that I am giving full authorization for Houston Event Planning to charge the agreed amount to my credit card account. I also agree by signing this form that I am liable for any false or misleading information given.

Fare of the Cruise _____

Amount

Description of Charge/ Event

 Signature and Date

By initialing here you authorize us to resolve your remaining balance on date due.

Please sign and Fax a copy of the credit card, ID and Passport to complete transaction.

Booked by: _____	Processed by: _____	Deposit Recv: _____	Final Pmt: _____	Cabin # _____
Date: _____	Date: _____	Roomates Names: _____	Notes: _____	