

1. PASSENGER INFORMATION

Charterer: C-mail: Vationality: Cassport#: Charter of Birth: Charter of issue: Chart	Charterer: E-mail: Nationality: Passport#: Date of Birth: Date of issue: Place of issue: Place of birth: Sharing a twin/double cabin with: Allergies: Bees/Wasps Expiry date: Diary Gluten/Wheat Peanut Medication Personal dietary requirement:
Personal dietary requirement: □ Vegetarian □ Vegan □ Raw Vegan □ Pescatarian □ Lacto-Ovo Vegetarian	□ Vegetarian □ Vegan □ Raw Vegan □ Pescatarian □ Lacto-Ovo Vegetarian
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MAIN MEALS 2. ITINERARIES □ Formal Lunch ☐ Family style Please state any preferred cruising areas and particular ports or □ Formal ☐ Family style Dinner anchorages you would like to visit, if not already discussed with your charterer broker. If you plan to rendezvous with another Please state food preferences yacht or friends in a specific port, please confirm where and Like Dislike Indifferent **Beef** Pork Lamb Duck Chicken Veal 3. ACTIVITIES & INTERESTS Fish Seafood Please state any sporting/recreational activities you would Shellfish particularly like provided, such as water skiing, diving (for Vegetarian certified divers only), touring, sightseeing, golf, tennis, yoga, Salads massage, and beauty treatments etc. Please note that in some areas, diving is restricted. Note: not all yachts carry all toys. PREFERED MENUS/ DISHES Japanese □ Barbecue ☐ Local Cuisine 4. CELEBRATIONS ON BOARD ☐ French cuisine ☐ Asian Italian cuisine Indian □ Other_____ Please advise any special event you would like to celebrate, e.g. birthday, wedding or anniversary. Specialty food i.e. lobster, caviar, foie gras (please Name: specify how often you would like any specialty foods Date: listed) Occasion: 5. FOOD **DESERTS BREAKFAST** In general do you prefer □ Light □ Low fat Rich Continental ☐ Fruits/fruit based Chocolate **English** Special Cereals Requests: Fresh fruits **Pastries** Coffee Decaffeinated coffee WOULD YOU LIKE Juice Day time snacks (please specify preferred types of Fresh fruit juices snacks) American Bread Hors d'oeuvres with cocktails Yoghurt Buffet/light lunches Oatmeal Three course meal □ Lunch □ Dinner Milk Sov milk Tea SPECIAL DIETERY REQUIREMENTS Fresh vegetable juice □ Salt free ☐ Low cholesterol ☐ Low carbohydrate Other:_____ Religious (please name) Allergies____ What time do you generally prefer breakfast to be served?

□ 6:30-8:30 am □ 8:30-10:30 am □ 10:30-11:30

□ Pasta dishes □ Other (please spe		lads zza s)			HITE WINE	Price range per bottle		Quantity
Will children eat: □ With adults Do you have any inst meals?	□ separately □	with na	nny children's		OSE WINE	Price range per bottle	Year	Quantity
DO YOU OCCASION ASHORE FOR Lunch Please mention specific like to be made	☐ Dinne	er may hav		- - - - -				
6. WINES, SPIR Please state where rel required (quantities in purchased where avail each charter. BEER Brand	levant specific bran n "bottles" and "car	ds and q ns") – the	ese will be dered for		HAPMAGNE and Krug Cristal Ruinart Dom Perignon Moet et Chandon Armand de Brigna Veuve Clicquot Bollinger Other	ac		ur Quantity
RED WINE Brand	Price range per bottle	Year	Quantity	Bra	Vodka Cognacs Liqueurs Tequila			Quantity
					Pimms Rum Other			

Ш	ICES		Quantity	8. SPECIAL REQUIREMENTS
	Orange	☐ Freshly Squeezed		
	Grapefruit	☐ Freshly Squeezed		Please let us know if you would like a specific newspaper,
	Carrot	= Presing Squeezed		magazine, or other reading material. We will make arrangements
	Pineapple			where possible.
	Apple	☐ Freshly Squeezed		
	Tomato	- Meshiy Squeezed		
	Cranberry			
	Vegetable	☐ Freshly Squeezed		
		— Treshry Squeezed		
				Will you require internet connection? ☐ Yes ☐ No
				Please list any other requirements or information that may be
				of use to the crew.
BE	EVERAGES			
		Brand	Quantity	
	Still Mineral V	Water		9. Medical Information
		eral Water		
	Cola			Are you allergic to medication? \Box Yes \Box No
	Diet Cola		- -	If so what medications?
	Coca Zero			if so what inedications.
		Lemonade		Please advice of any special needs such as wheelchair access or
		Iced Tea		any medical condition such as diabetes, heart condition,
		nonade		epilepsy etc.
	Soda Water			
	Red Bull			
				10. Medical & Emergency Contact
				In the event of specialist medical conditions please
				confirm doctor's name and contact details:
				Doctor's name:
				E-mail address:
7.	FLOWERS			
				24hours telephone number:
Ini	tial flower displ	ay are complimentary, how	vavar nlagga	Emergency Contact Name:
		equirements. Flowers to be		Emergency Contact Number:
		then they need replacing	changea.	
	No additional			
		sts		11. CONTACT
		565		11. CONTACT
				TM
				Please give address and telephone number where you can be
				contacted 48 hours prior to embarkation.
				Telephone:
	Flowers or pla	nt allergies		Mobile
				Mobile:
				E-mail address:
				Z man addicos.

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11. TRAVEL ARRANGEMENTS

To assist you in meeting your travel arrangements please provide the following details for yourself and any other members of your party. We can arrange for transport to meet you at the airport and escort you to the yacht (at the charterer's expense).

	Guest party 1	Guest party 2	Guest party 3	Guest party 4	
Names					
Arrival date					
Time					
Flight no.					
No. of persons					
Arrival airport					
Departure date					
Time					
Flight no.					
No. of persons					
Departure airport					
If overnight stay					
Hotel name					
Hotel telephone					
Hotel e-mail					
Hotel e-man				_	
Names Arrival date Time Flight no. No. of persons Arrival airport Departure date Time Flight no. No. of persons Departure airport	Guest party 5	Guest party 6	Guest party 7	Guest party 8	
If overnight stay					
Hotel name					
				-	
Hotel telephone				-	
Hotel e-mail				-	
	ers per day do you prefe	r to spend cruising? (This i	s not always controllable es	specially on extensive itineraries	s.
2. How much inte	eraction would you like	with the crew? Eg. Do you	prefer discreet service or a	n interactive crew?	
If passengers are arrivin	g by other forms of tran	sport (ex. by car) please pr	rovide details.		
	8 - 7				

Please advice if guests need collecting from a hotel and if so, please provide details including address.
Please advice of any additional information you would like the crew to have plus any special requests or notes.