



Paws With A Cause® Assistance Dog Cruise



Royal Caribbean - FREEDOM of the Seas January 29 - February 5, 2012

Please complete and file by fax: (207) 882-6922 or scan and email to cruises@gwi.net

Guest #1:

Name: Last: _____ First: _____ Middle: _____
(AS IT APPEARS ON YOUR PASSPORT)

Address: _____ City _____

State: _____ Zip: _____ Email: _____

Phone Numbers: Home: _____ Office: _____ Cell: _____

Date of Birth: (mm/dd/yyyy): _____ RCCL Crown & Anchor Number: _____

Tee Shirt Size: () Sm () Med () Lg () Xtra Lg () XXLarge

Dining Time: Early approx 6PM with group () Late Approx 8:30 PM ()

Cabin Category: Inside () Ocean view () Balcony () Suite on Request ()

Is an Accessible Stateroom Required () yes () no Bed Configuration: TOGETHER () APART ()

Special Needs: Dietary Request / Food Allergies etc _____

Service Animal: () yes () no - If yes: Type: _____ Age: _____

Wheelchair: () If yes: Type _____ weight _____lbs Battery Type: _____

Special Occasion? _____ Day to Celebrate _____

SECOND GUEST IN CABIN

Name: Last: _____ First: _____ Middle: _____
(AS IT APPEARS ON YOUR PASSPORT)

Address: _____ City _____

State: _____ Zip: _____ Email: _____

Phone Numbers: Home: _____ Office: _____ Cell: _____

Date of Birth: (mm/dd/yyyy): _____ RCCL Crown & Anchor Number: _____

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Wheelchair: () If yes: Type _____ weight _____lbs Battery Type: _____

Special Occasion? _____ Day to Celebrate _____

Additional needs/information you want us to be aware of: _____

PASSPORTS ARE REQUIRED FOR THIS CRUISE.

Please use an additional form if there are to be more than two in a stateroom.

Worldwide Cruise Headquarters, 36 Cod Cove Farm Rd., Edgecomb, ME 04556 (207) 882-5525