

INFORMATION FORM

Ship: Celebrity Summit	Sail Date:	June 6-13	June 13-	20	BOTH!	
Room Preference:	Inside	Oceanview Balcony				
PASSENGER #1						
Full Legal Name (as it appea	rs on your pas	sport):				
Date of Birth:	e-mail:	e-mail:				
Address:						
City:	S	State:		Zip Code:		
Phone: Cruise Loyalty # (if applicable):						
PASSENGER #2						
Full Legal Name (as it appea	rs on your pas	sport):				
Date of Birth:	e-mail:	e-mail:				
Address:						
City:		State:	Zip Cod	de:		
Phone:	Cruise Loyalty # (if applicable):					
I'm interested in:		Travel Protection Y/N				
		Pre-Paid Gratuities Y/N Combo Air Package Y/N				

ONCE COMPLETED, EMAIL TO: