



**Cruise Registration Form – Hendershizzle Group**  
**7 Day Mexican Riviera Cruise – September 7– September 14, 2009**  
**RCCL “Vision of the Seas” from Los Angeles**

PLEASE PRINT CLEARLY OR TYPE (For Word version request by email)

<b>Today's Date</b>			
<b>SUBMIT REGISTRATION FORM BY MAIL, PDF OR FAX - With Check or Credit Card</b>			
<b>Legal Name Must appear as it will appear on your boarding documents (i.e. passport) Passports are required 1/1/2008.</b>			
First Name	Middle 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	
<b>PAYMENT INFORMATION</b>			
<b>Make Checks payable to Sundancer Cruises or send Credit Card Form below</b>			
Type of Credit Card (MasterCard, Visa, or Discover)			Expiration Date
Your name as it appears on the credit card			
Credit Card Number			
<b>CABIN MATE INFORMATION (If above information is different Cabin Mate must fill out separate form)</b>			
<b>Legal Name Must appear as it will appear on your boarding documents (i.e. passport)</b>			
Cabin Mate's First Name		Cabin Mate's Last Name	
Relationship	Date of Birth	Citizenship	<input type="checkbox"/> Male <input type="checkbox"/> Female
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
<b>REFERRAL INFORMATION</b>			
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
Passport No.	Date Issued	Place Issued	Expiration Date

**LIMITED NUMBER OF CABINS AT THESE PRICES –FIRST COME – DON'T WAIT UNTIL DEPOSIT DEADLINE !**

**Travel info. & Registration to book with our group:**

Cathy or Brent Paxton of Sundancer Cruises  
 303-250-7344 (Colorado) or 866-409-SAIL (7245) - Fax 303-284-0983 or (303) 657-9457  
[info@SundancerCruises.net](mailto:info@SundancerCruises.net) • [www.SundancerCruises.net](http://www.SundancerCruises.net)

**Make Checks Payable to Sundancer Cruises, Inc.**  
**Mail to: Sundancer Cruises, Inc., 8401 Gray Street, Arvada, CO 80003-1331**  
**We accept MasterCard, Visa & Discover - Deposit \$275.00 per person**