

**TRAVEL REGISTRATION**  
**ALASKA WILDLIFE EXPRESS CRUISE**  
**August 12-22, 2025**

**Passenger Names:** \_\_\_\_\_ **Departure City Airport** \_\_\_\_\_ **Today's Date:** \_\_\_\_\_  
**Name:** (As it appears on Passport) \_\_\_\_\_ **Sex:** Male \_\_\_ Female \_\_\_  
**Preferred Name (Nametag):** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Roommate:** \_\_\_\_\_  
**Passport Number** \_\_\_\_\_ **Birthdate** \_\_\_\_\_ **State of Birth** \_\_\_\_\_  
**Passport Issue Date** \_\_\_\_\_ **Passport Expiration Date** \_\_\_\_\_ **Place of Issue (Authority)** \_\_\_\_\_  
**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Alternate Phone:** \_\_\_\_\_ **Travel Protection:** \_\_\_ Accept \_\_\_ Decline

**Name:** (As it appears on Passport) \_\_\_\_\_ **Sex:** Male \_\_\_ Female \_\_\_  
**Preferred Name (Nametag):** \_\_\_\_\_ **Title:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Roommate:** \_\_\_\_\_  
**Passport Number** \_\_\_\_\_ **Birthdate** \_\_\_\_\_ **State of Birth** \_\_\_\_\_  
**Passport Issue Date** \_\_\_\_\_ **Passport Expiration Date** \_\_\_\_\_ **Place of Issue (Authority)** \_\_\_\_\_  
**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Alternate Phone:** \_\_\_\_\_ **Travel Protection:** \_\_\_ Accept \_\_\_ Decline

**Rates Per Person Double Occupancy From NY**  
4V Interior Stateroom \$4,300.00  
4P Ocean View Stateroom \$4,800.00  
4H Ocean View Balcony Stateroom \$5,700.00

**Stateroom Selection**  
\_\_\_ 1st Choice  
\_\_\_ 2nd Choice  
(Required: Only used if  
1st choice is unavailable.)

**See brochure for airfare from a city near you.**

<b>Optional Travel Protection Plan</b>	
<b>Trip Cost</b>	<b>Plan Cost</b>
\$5,000 - \$5,500	\$549.00
\$5,501- \$6,000	\$599.00
\$6,001 - \$6,500	\$649.00
\$6,501-\$7,000	\$699.00
\$7,001-\$8,000	\$799.00
\$8,001-\$9,000	\$899.00
\$9,001-\$10,000	\$999.00

See brochure for additional amounts

Cost of Cruise	___ @ ___	\$ _____
Miscellaneous	___ @ ___	\$ _____
Miscellaneous	___ @ ___	\$ _____
Include Airfare	___ @ ___	\$ _____
<b>SUB-TOTAL DUE</b>	___ @ ___	\$ _____
<b>Travel Protection</b>	___ @ ___	\$ _____
		<b>TOTAL DUE \$</b> _____

\$250.00 per person Deposit Due with Registration

2nd deposit of \$250.00 due January 14, 2025

Full payment is due By April 14, 2025



By signing below, I/We certify that I have read the "Fine Print" in the brochure, understand its content, and agree to its terms including but not limited to the potential for price increases that may apply before payment in full has been received as set forth in the "Fine Print" and potential price increases after payment in full has been received due to government-imposed taxes and fees.

Signature \_\_\_\_\_ Signature \_\_\_\_\_

**Senior Adult Travel Inc. PO Box 142045, Gainesville FL, 32614**

For additional information contact: Jerry Nash 352-727-2268 jerry@senioradulttravel.com

Senior Adult Travel Inc. is registered with the State of Florida as a Seller of Travel, Registration Number ST40596.