



Travel Agency Transfer Form

I _____ would like to transfer reservation number _____
Passenger Name Reservation Number

for the _____ on the sailing date of _____ to my travel agent.
Name of Ship Sailing Date

Travel Agency Information:

Agency Name: _____

Booking Phone Number: _____

Agent's Name: _____

Agent's Email: _____

Passengers Traveling in Stateroom:

Print Name: _____ Signature: _____

Please fax this completed form to: (908) 605-2600 Attn: Sales Service

****Bookings may be transferred over to a Travel Agency if the booking is outside the final payment date and/or has not been paid in full. ****