Holland America Line Online Check-In Worksheet

1. GUEST INFORMATION

Booking Number:Name:				
Country of Citizenship:	Country (of Residence:	DAY	YEAR)
2. HOME ADDRESS & PHONE	NUMBERS			
Address (Line 1):				
(Line 2):				
		State/Province:		
Postal Code:	Country:	Country:		
Telephone:	Cell Phor	Cell Phone (not required):		
Email Address (not required):				
3. PASSPORT (OR OTHER ID)	DETAILS			
PASSPORT				
Country of Issuance:	Country	of Birth:		
Passport Number (exactly 9 digits):			
Issue Date: / / (MONTH DAY YEAR)	Expiration Date:_			
(MONTH DAY YEAR) NO PASSPORT	()	MONTH DAY YEAR)		
	isphere travel Initiative do	ocument you will use in lieu of a Passport.		
	isplicie travel illitiative ac	ocument you win use in nea of a rassport.		
Passport Card				
•		mber:		
Issue Date:/ (MONTH_DAY	_/Expiration	n Date: / / (MONTH DAY YEAR)		
Enhanced Driver's Licens	,	(MONITE DATE TEAM)		
State of Issuance:	Country	of Birth:		
Card Number:	<u> </u>			
		n Date:/ (MONTH_DAY_YEAR)		
		(MONTH DAY YEAR)		
Enhanced Non-Driver ID		4-1		
	•	of Birth:		
Card Number:				
Issue Date: /	_/Expiration	n Date: / / (MONTH DAY YEAR)		
NEXUS Card				
Country of Birth:	Expiration	n Date: / / (MONTH DAY YEAR)		
SENRTI Card		,		
Country of Birth:	Expiration	n Date:/ (MONTH_DAY_YEAR)		
Fast Card				
Country of Birth:	Expiration	n Date://		
		(MONTH DAY YEAR)		
Birth Certificate (with a g	-			
Country of Birth:				

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4. PRE & POST CRUISE TRAVEL PLANS (For guests who have their flight information.)

Pre-Cruise Flight Information

Arrival Airport:	Arrival Date: / (MONTH_DAY_YEAR)				
Arrival Time	Airline:	Flight Number:			
		cour departure city):			
1 1	· ·	•			
Departure Date: / / (MONTH DAY YEAR)					
Post-Cruise Flight Information					
Departure Airport:	Destination:	Departure Date:/ / (MONTH_DAY_YEAR)			
Departure Time:	Airline:	Flight Number:			
5. Emergency Contacts					
Full Name:	Relationship (8 characters):				
Country:	-				
(Line 2):					
		Postal Code:			
Phone Number:					
CONDOADD EVDENCEC					
6. ONBOARD EXPENSES					
Mastercard*, American Express*, and Discovenumber(s) will be securely sent to the ship in USD \$60+ per person for each day of your crusailing.) At the end of your cruise, you will repurchases. Please have the credit card(s) you needs additional information. Please inform your credit card issuer in advandelays in obtaining pre-authorization. Some be	er*) you will be able to use preparation for your cruis uise. (Please note, this hold receive a final statement, and registered with you and avence that your card will be ubanks may keep the pre-au	• • •			
(USD \$60/person/day)+. ***Note - With the	e cash option, you MUST b rd. Any excess deposit will	sh deposit from you at time of boarding in the same amount ring enough cash to cover the \$60/person/day ⁺ account deposit. be refunded to you at the end of the cruise. Traveler's checks are not accepted on board.			
When you board the ship, your account will lidentification card and signing a receipt.	have been activated and yo	u may make purchases immediately by showing your guest			
+ For cruises longer than 25 days, the hold is US\$30.00	per person, per day.				
I agree to the Onboard Expenses Terms &	& Conditions.				
Name (Print):					
Signature:		Date:			

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Credit Card Details

Cardholder's Name (as it appea	ırs on the card):			_
Card Type: Visa® /	Mastercard® /	American Express®	/	Discover®
Card Number:		Expi	ration Da	ite:/
		- 1		(MONTH YEAR)
Credit Card Billing Informati	ion (If it's not the same	as your home address.)		
Address (Line 1):				
City:				
Zip Code:	Country:			

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