





ST HELENA BOOKING FORM

PLEASE USE CAPITAL LETTERS THROUGHOUT AND ENSURE THAT YOU COMPLETE ALL SECTIONS OF THIS FORM. ONE FORM PER PASSENGER.

Voyage From/To:
Anticipated Departure Date:
Embarkation Port:
Full permanent address to which all correspondence/travel documentation is to be sent:
House Number:
Street Name:
Town/City:
Country:
Postcode:
Telephone No:
Email Address:
Mobile No*:
*It is extremely helpful, especially in emergencies or in situations where there is a last minute
change of plans, if you bring a mobile phone with you.
change of plans, if you bring a mobile priorie with you.
Passenger Details (as they appear on your passport):
Title:
Forename:
Middle Name:
Surname:
Date of Birth (dd/mm/yyyy):
Place of Birth:

Nationality:
Passport Number:
i assport Number.
Date of Issue (dd/mm/yyyy):
Date of Expiry (dd/mm/yyyy):
Place of Issue:
Special requests in relation to the above passenger (eg. Special medical dietary requests, allergies or intolerances).
Requests will be passed to the vessel in line with our privacy policy but cannot be guaranteed.
We are able to offer a choice of twin-bedded and double-bedded accommodation, also available for sole use (depending on chosen pricing category). Details of all cabins and ship layout can be found at www.sthelenavoyages.com Please select/indicate your preferred cabin grade (you may also specify a cabin number) but please
note that this cannot be guaranteed and will be confirmed at time of booking confirmation.
Cabin Category:
Penthouse & B Deck Cabin:
A Deck:
C Deck:
Single/Sole Occupancy:
Twin:
Double:
Triple:
Quadruple: Bunk:
Cabin number allocated/confirmed by Agent:
Cabili Humber anocated/committed by Agent.
Emergency Contact(s) (if travelling with others, this must be for someone not travelling with you). Please advise the name(s) and contact details of your next of kin in case of an emergency:
Name:
Relationship:
Telephone number(s):

Mobile number:
Email:
Health and Fitness
1. Do you suffer from any disability or any other medical condition that may affect your voyage arrangements? Answer Yes/No
2. Do you have any walking difficulties or mobility restrictions and/or walk with a stick or other mobility aid and/or are able to walk short distances only? Answer Yes/No
3. Will you be fully vaccinated for Covid-19 at the time of departure? Yes/No
You will be notified of any specific health formalities for your voyage including any requirements relating to Covid-19 vaccination and testing prior to and at embarkation.
If you answer YES to either of the questions 1 or 2 above, please provide further details in the space below (please attach additional paper if required).
Joining/leaving the vessel may necessitate walking over uneven terrain, climbing steps, embarking and/or disembarking by water craft etc. If you are unsure of your fitness or the suitability of the voyage please contact us for further advice. If we have concerns we may require a letter from your doctor certifying your fitness to travel.
Insurance
It is mandatory that you have suitable and adequate travel insurance in force for the duration of the voyage. Please see clause 11.2 of the booking conditions for further information. If you already have your insurance details, please set out below the name of your insurer, the relevant policy number and your insurer's emergency telephone number.
Please note: we are entitled to confirm your booking without having received details of your insurance cover or doctor's note. When we do so, a contract will come into existence between us in accordance with our booking conditions. If you do not provide evidence of insurance cover and/or a doctor's note (if one is requested by us) by the time your balance is due (or by any other reasonable deadline we stipulate prior to departure), we reserve the right to cancel your booking and apply charges as set out in clause 8 of our booking conditions.
Name of Insurer:
Insurer's Emergency Telephone No:
Policy Number:

Payment

To confirm your booking we will need to collect a deposit of 25% per person, or full payment if within 45 days of departure. Balance payments are due 45 days before departure.

Fares are contracted calculated and fixed in GBP Sterling; Euro rates are shown as indicative only (£1.00/€1.20).

Methods of Payment:

You may choose to pay by credit/debit card or bank transfer.

To make card payments by telephone, please contact us on +44 1983 303314, please ask if you require our bank details or a credit/debit card payment authorisation form.

Declaration

I confirm I have read and agree to the Booking Information and Terms and Conditions of the Carrier Extreme E Ltd. and acknowledge that Cargo Ship Voyages (Seabreaks Ltd) acts as retail agent only, appointed to manage passenger bookings on behalf of the Carrier Extreme E Ltd.

In order to process your booking and to ensure that your voyage runs smoothly and meets your requirements, we will need to use your personal information as detailed in our privacy policy. In making a booking, you agree to the terms of our privacy policy which can be viewed at clause 18 of our Terms and Conditions of Carrier.

Please sign below:

Name in capitals:
Signature by hand only (digital not acceptable):
Dated: