



Booking Form

I/We declare the wish to book as follows: _____ Ship: _____

Travel Area / Route: _____

Port of Embarkation: _____ Port of Landing: _____

Date of Departure approximately: _____ Passanger: _____ Duration approx.: _____

Price per Passenger: _____

Single Cabin/s: _____ Double Cabin/s: _____

Data of the Passenger:

Family Name: _____ Given Name: _____ Date of Birth: _____

Place of Birth: _____ Gender: _____ Nationality: _____

Telephone No. during the day: _____

Email: _____ Complete home address: _____

Passport-Number: _____ Passport issuing place: _____

Passport issuing date: _____ valid until: _____

Additional Passenger:

Family Name: _____ Given Name: _____ Date of Birth: _____

Place of Birth: _____ Gender: _____ Nationality: _____

Telephone No. during the day: _____

Email: _____ Complete home address: _____

Passport-Number: _____ Passport issuing place: _____

Passport issuing date: _____ valid until: _____

Rental bikes _____ pcs Body height/s (for rental bikes): _____

Rental e-bikes _____ pcs Body height/s (for rental e-bikes): _____

Would you like e-bike insurance (25 €/week)? _____ Yes/ No

Bring your own bike: _____ pcs

Bring your own e-bike: _____ pcs

Who should be informed in case of emergency (Name, Address, Telephone): _____

Are all persons listed on this questionnaire covered by an international health insurance with repatriation benefits? Yes: _____ No: _____

How did you know about 'SLOWTRAVEL experience'? (Advertisement, Internet, Google, Friends, etc.?)

Place / Date: _____ Signature: _____