

ALASKA SEA ADVENTURES PRE-CRUISE PLANNER



The information you provide on this form enables us to plan and serve you better. It also helps us comply with U.S. Coast Guard requirements for ships' manifests. We require some basic medical information. All information will be kept strictly confidential unless there is an emergency. Our first priority is your safety; second is your comfort and pleasure. Please mail or fax the completed form to us. Each guest - please complete each side of this form. Thank you.

CRUISE # _____	NAME: _____	NICK NAME: _____
STREET: _____	CITY: _____	STATE: _____ COUNTRY: _____
POSTAL CODE: _____	PHONE WK:(____)	HM:(____) CELL:(____)
EMAIL: _____	FAX:(____)	
BIRTHDATE: ____/____/____	SEX: __M__F	AGE: _____ HEIGHT: _____ WEIGHT: _____ TOBACCO USE: _____
NOTIFY IN CASE OF EMERGENCY: _____	PHONE: (____)	RELATIONSHIP: _____
ALLERGIES: __Y__N	LIST: _____	
DIETARY REQUIREMENTS: __Y__N	LIST: _____	
CURRENT MEDICATIONS: __Y__N	LIST: _____	
CHRONIC MEDICAL CONDITIONS: __Y__N	LIST: _____	
ANY PHYSICAL LIMITATIONS: __Y__N	LIST: _____	
SUSCEPTIBILITY TO MOTION SICKNESS: __LOW__MED__HIGH	LEVEL OF DAILY ACTIVITY: __LOW__MED__HIGH	
MEAL & BEVERAGE PREFERENCES: _____		

CRUISE # _____	NAME: _____	NICK NAME: _____
STREET: _____	CITY: _____	STATE: _____ COUNTRY: _____
POSTAL CODE: _____	PHONE WK:(____)	HM:(____) CELL:(____)
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NAME: _____

PLEASE RATE ACTIVITY PREFERENCES ON A SCALE OF:
0-3 (0=NONE; 1=MINOR; 2=MODERATE; 3=HIGH)

<input type="checkbox"/> GLACIERS	<input type="checkbox"/> ISLAND EXPLORING	<input type="checkbox"/> MARINE MAMMALS
<input type="checkbox"/> ARCHEOLOGY	<input type="checkbox"/> NATIVE CULTURE	<input type="checkbox"/> HOT SPRINGS
<input type="checkbox"/> BEACH COMBING	<input type="checkbox"/> NATURAL HISTORY	<input type="checkbox"/> SALTWATER FISHING
<input type="checkbox"/> BEARS	<input type="checkbox"/> PHOTOGRAPHY	<input type="checkbox"/> CLAM DIGGING
<input type="checkbox"/> BIRD WATCHING	<input type="checkbox"/> SEA LIONS	<input type="checkbox"/> CRABBING
<input type="checkbox"/> EAGLES	<input type="checkbox"/> WHALE WATCHING	<input type="checkbox"/> STREAM FISHING
<input type="checkbox"/> HIKING		
<input type="checkbox"/> SEA KAYAKING <i>Present skill level?</i> _____		
<input type="checkbox"/> FLIGHT SEEING <i>(Highly recommended! Air charter approx. \$190/ per person - 1 hour flight)</i>		
<input type="checkbox"/> OTHER _____		

NAME: _____

PLEASE RATE ACTIVITY PREFERENCES ON A SCALE OF:
0-3 (0=NONE; 1=MINOR; 2=MODERATE; 3=HIGH)

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<input type="checkbox"/> OTHER _____		

Are there any special events, birthdays or anniversaries during this trip?
