



Debonair
Concierge Travel Services, LLC

General Reservation Form-

US Passport Name including -(1st, Middle, Last) for International or Driver's License for domestic travel (as it is shown on your document)

_____ date of birth _____
_____ date of birth _____
_____ date of birth _____
_____ date of birth _____

Passports need to be valid for 6 months past the return date. If not US Passport, list country of citizenship: _____

Number of people traveling: _____ number of rooms _____ bedding request _____

Destination _____

Dates of travel _____

Billing/Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ home _____ cell _____

Email: _____

Call us with your credit card number, expiration date, ccv & card holder name to make a payment or purchase Trip Cancellation Insurance

Ask us for a quote on Trip Cancellation Insurance: State of residence _____ Freestyle/cancellations for medical/death _____ Cancel any reason 75% refund _____ accept _____ decline _____

Contact us: Deb@Debonair-Travel.com, Deb 239-288-7554 / Bob@Debonair-Travel.com, Bob 239-249-9575

Gina@Debonair-Travel.com, Gina 239-246-5605 / Michelle@Debonair-Travel.com, Michelle 401-4804249

Please let us know of any Mobility issues _____

Please let us know if you have any dietary requirements _____

Request Vegetarian Meals- guest 1 _____ 2 _____ 3 _____ 4 _____

Request Gluten Free Meals-guest 1 _____ 2 _____ 3 _____ 4 _____

Would you like a Pre cruise or tour stay _____ and or Post cruise or tour stay _____

Do you need help with air fare _____ Airport city departure preferences _____

Frequent Flyer number _____ Seat preference _____ Aisle & next _____ Window & next _____

Known Traveler # _____

How did you hear about us? _____