

Date of form completion: (yyyy/mm/dd)

0

~Thank you for helping us to protect your health.

CRUISE INFORMATION: 1. Cruise line name 2. Cruise ship name 3. Cabin Number 4. Date of disembarkation (yyyy/mm/dd)

4. Date of disembarkation (yyyy/mm/dd)

2	0						
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9. Age (years)

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[illegible][illegible]

18. ZIP/Postal code

[illegible]

20. Apartment number

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[illegible][illegible]

27. Apartment number 1

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[illegible]

33. Apartment number 2

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PASSENGER/CREW LOCATOR FORM – CRUISE SHIPS

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34. TRAVEL COMPANIONS – FAMILY: Only include age if younger than 18 years

Last (Family) Name

First (Given) Name

Cabin number

Age <18

[illegible]

35. TRAVEL COMPANIONS – NON-FAMILY/NON-SAME HOUSEHOLD: Also include name of group (if any)

Last (Family) Name

First (Given) Name

Group (tour, team, business, other)

[illegible][illegible]

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To be completed by CREW only:

36. Working sector on board:

[illegible]

37. Co-habitants in cabin:

Last (Family) Name

First (Given) Name

[illegible]
