40 SouthMainStreet,21st Floor, Memphis,TN38103

**Guest Information Form**

All Guests must complete this form, which is used for U.S. Department of Homeland Security and Coast Guard purposes.

All information should be exactly as it appears on your government-issued photo identification. Please type or print clearly.

|  |  |  |
| --- | --- | --- |
|  | **First Guest** | **Second Guest** |
| Travel Agency Name: |  |
| Last Name: |  |  |
| First Name: |  |  |
| Permanent Street Address: |  |  |
| City / State: |  |  |
| Zip / Country: |  |  |
| Home Telephone: |  |  |
| Business Telephone: |  |  |
| Cell Phone: |  |  |
| Email Address: |  |  |
| Birthplace / City & State: |  |  |
| Birthplace / Country: |  |  |
| Date of Birth: |  |  |
| Citizenship: |  |  |
| Type of ID (Passport, Driver License, or Military): |  |  |
| Place of Issue: |  |  |
| ID Number: |  |  |
| Date of Issue: |  |  |
| Expiration Date: |  |  |
| Emergency Contact: |  |  |
| Emergency Contact Telephone: |  |  |

Will you be celebrating a special occasion with us? Please specify the date and nature of the celebration:

Do you have any special dietary needs?

Do you have any mobility issues or health concerns we should be aware of?

Do you have any special bedding preferences?

❑Two twin beds ❑Queen bed (if applicable for your cabin category)

Dining Request: ❑Early Seating (5.15pm) ❑Late Seating (8.00pm)

For special recognition onboard, please let us know if you have travelled aboard Delta Queen, Mississippi Queen,

Columbia Queen or American Queen in the past?❑Yes ❑No If yes, how many times?