

REGENCY Yacht Vacations Ltd.

Email: charter@regencyvacations.com



CHARTER PREFERENCES

To assist with the preparation of your charter, please complete the following to enable us to best meet your requirements. This is for your entire charter party - *please get together for everyone's input.*

BACKGROUND

Client Name: Your Charter Group Yacht: The Yacht You Choose
 Contact for party: Your Choice Charter Dates: January to January
 Home Phone: Charter Broker:
 Work Phone: Client Email:

YOUR GROUP: Please list all members of your charter party and note that passports are required for most destinations.

Name	Address (including zip code)	Phone/ Email	Passport	Age	Citizen of
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

TRAVEL PLANS:

Arrival Date: _____ Arrival Time: _____ Airline & Flight #: _____
 Name of Hotel: _____ Date In: _____ Date Out: _____
 Departure Date: _____ Departure Time: _____ Airline & Flight #: _____
 Name of Hotel: _____ Date In: _____ Date Out: _____

ACTIVITIES: Please indicate your preferences. If you wish, attach a sheet with more information on your activity preferences.

Sailing _____ Sunning _____ Island Tours _____ Shopping _____
 Swimming _____ Fishing _____ Beachcombing _____ Music & Dancing _____
 Windsurfing _____ Exploring _____ Scuba Diving (Certified Divers) _____
 Snorkeling Shoe sizes: _____

Special Occasions during your charter that you would like the crew to be aware of:

Birthday(date) _____ Anniversary (date) _____ Honeymoon _____ Other (give name & date) _____

CHARACTERISTICS: Give a brief description of your group's sailing & chartering experience; send a picture if you like.

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FOOD PREFERENCES:

Please note your tastes by checking the food group below, or even specifying certain menu-dish suggestions.

Important: please get your entire charter party's input on this! Knowing how your entire group likes to eat allows the cook to accurately accommodate your tastes for the time you'll be with us. Many items are not available on all islands and must be arranged in advance. **Accurate information is vital for your pleasure!**

Food	Special Likes	Special Dislikes	Special Notes
Beef	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Breakfast: American _____ Continental _____
Pork	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Both _____
Lamb	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Lunch: Light _____ Heavy _____
Chicken	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Hot _____ Cold _____
Veal	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Dinner: Do you plan on having dinner ashore one night? <i>Please understand this is at your expense and will not be deducted from your charter fee.</i>
Vegetarian	<input type="checkbox"/> _____	<input type="checkbox"/> _____	
Duck	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Dessert: Do you enjoy desserts or do you find a good meal sufficient?
Shellfish	<input type="checkbox"/> _____	<input type="checkbox"/> _____	_____
Fish	<input type="checkbox"/> _____	<input type="checkbox"/> _____	Snacks: _____
Other	<input type="checkbox"/> _____	_____	_____

Please make a note of any medical problems among your party members (heart disease, epilepsy, diabetes)

Allergies and Dietary requirements/Special Health Information

Kids preferences:

Snacks	_____	Special Likes	_____
Cold Drinks	_____	Special Dislikes	_____

Bar Preferences

Please note approximate quantities. Please note that some brand names and items may not always be available. *If bar is included, standard brand liquors and wines are supplied. Requested vintage wines and champagnes will be put aboard at the charterer's expense.*

Wine

Liquor includes hard liquor and liqueurs

Beer

Sodas/Mixes

Juices

Other

Please return this form by mail, email or fax at least one month before departure, so that your crew has enough time to made preparations for your trip.