



**CONSENT**  
**“INDIVIDUAL EMBARKATION /**  
**INDIVIDUAL DISEMBARKATION“**

Phone: +49 40 3070 3070  
Fax: +49 40 3070-3170  
E-Mail: [salesteam@hl-cruises.com](mailto:salesteam@hl-cruises.com)

For your cruise you have chosen a different date / port for individual embarkation / disembarkation. Please note:

In the unlikely event that unforeseen circumstances prevail, such as weather or medical disembarkation, a change of itinerary might come necessary. In case this change affects your chosen date / port of embarkation / disembarkation, additional expenses are not to be claimed at Hapag-Lloyd Cruises.

**Cruise Number** \_\_\_\_\_

**Booking Number** \_\_\_\_\_

**Suite** \_\_\_\_\_

**Port** \_\_\_\_\_

**Date** \_\_\_\_\_

**Passenger 1**  
Name, Surname/s \_\_\_\_\_

**Passenger 2**  
Name, Surname/s \_\_\_\_\_

**Contact Number**  
Mobile \_\_\_\_\_

**Contact Address**  
e.g. Hotel \_\_\_\_\_

Please sign this form completed and signed to your travel agency or fax it to us on **+49 40 30 70 31 70** or by email to **salesteam@hl-cruises.com** as an indication that you have read the material and are in agreement with the conditions. Thank you!

Upon receipt we will send you a booking confirmation.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Last revised: 02/2016