



SEABOURN®

# Reservation Transfer Request Form

Please complete and return this form to Seabourn at [guestservices@seabourn.com](mailto:guestservices@seabourn.com) or fax at 206-501-2900. If you would like to transfer multiple suites, a form must be signed and submitted by one guest per suite.

**Bookings may only be transferred within 60 days of booking creation and the booking cannot be paid in full.**

Booking Information		
Booking reference # (REQUIRED)	Ship Name	Sail Date (DD/MM/YYYY)
		/ /
Travel Agency Name (if applicable)		Voyage Number
Guest Name(s)		
Home telephone number		Email address

Change Requested (please select one of the below)		
<input type="radio"/> Direct/PCC/Online Booking to Agency	<input type="radio"/> Agency Booking to New Agency	<input type="radio"/> Agency Booking to Direct
New Agency Name:		Phone Number:
New Travel Agent's Name:		FOR INTERNAL USE ONLY: New Agency ID
Reason for Transfer (for quality assurance purposes)		

In requesting this transfer, I understand the Travel Advisor above will be responsible for ongoing booking support, and will have access to the personal information of all travelers on the booking. I understand current value-added promotions may not be applicable under the new Travel Agency.

### Payment Information

- I acknowledge that if a booking payment was made via guest check or credit card, the funds will remain on the booking.
- I acknowledge that if a booking payment was made via travel agency check, the funds will be refunded to the original agency unless Seabourn receives a letter of authorization which specifically states that any or all of the funds may be transferred to the transferred booking. If the original agency does not send Seabourn this letter, I understand that I must make a new payment on the transferred booking within one week of the transfer date. I am responsible for recovering monies from the original agency. Seabourn is not responsible for the refund on the original payment(s).

By signing this form, you are requesting your booking and related information to be transferred to the above-listed New Agency. Going forward, please contact the new agency for any booking-related questions. We look forward to welcoming you on board.

Signature		
Name (please print)	Signature	Date

*You can fill this form out on your computer, save, and print. Please sign where indicated and return via email or facsimile.*