

Direct Guest Reservation Transfer Request Form

	d like to transfer my reservation number	on the
(Guest Name)		(Reservation Number)
	sailing on	to my travel agent.
(Name of Ship)	(Sailing Date)	
Here is the information of my tra	avel agency:	
Travel Agency Name:_	Pride And Passport (NCL 813323)
Travel Agent Name: _	Joseph Slama (NCL 2762860)	
Travel Agency Phone Number:	623-221-4735	
The guests traveling in the state	eroom are:	
I prefer to work with my t	ansfer to a travel agency (optional): ravel advisor, who manages all my	
· · · · · · · · · · · · · · · · · · ·	ervice, expert guidance, and added	d value throughout the
booking process and trav	ret experience.	
outside of Final Payment peri transfer requests can be prod if the transfer request involves a required criteria and you would	od. For new reservations booked with ressed if the request is received within a change in currency, we cannot accomm like to transfer your reservation, please of the reservation to Norwegian. When e	days from creation, if the request is made in final payment period, that are paid in full 7 or less days of final payment application odate a transfer. If your reservation meets the complete this form. Transfer request must be mailing the form to us at Dispatch@ncl.com
Print Name	Email address	/ Phone No.
Signature	Date	