

SHORE EXCURSION INVOICE

[Operator Agency Name]

[Contact Details/Email]

Invoice #: _____

Date: _____

BILL TO

[Group Name / Lead Guest]

[Vessel / Cruise Line]

[Cabin Number/Booking ID]

EXCURSION DETAILS

Tour Name: _____

Port of Call: _____

Date of Service: _____

Description	Quantity	Unit Price	Amount
Adult Excursion Fee			
Child Excursion Fee			
Private Transport Surcharge			
Optional Add-ons / Gratuity			
<hr/>			
Subtotal: \$	_____		
Tax/Fees: \$	_____		
TOTAL DUE: \$	_____		

TERMS & INSTRUCTIONS

Please make payment via [Payment Method]. Cancellations made within [X] hours of arrival are subject to a [X]% fee. Thank you for choosing our services for your port visit.