

AURELIAN EXPEDITIONS

BOOKING INVOICE

GUEST DETAILS [Guest Name]

[Guest Address Line 1]
[City, Country, Postcode]
[Email Address]

RESERVATION INFO Invoice #: [000000]
Date: [Date of Issue]
Booking Ref: [BR-000]
Advisor: [Name]

EXPEDITION OVERVIEW

[Expedition Name / Destination]

Vessel: [Vessel Name] | Suite: [Suite Category/No.]
Departure: [Date] - Return: [Date]

DESCRIPTION	GUESTS	RATE	AMOUNT
All-Inclusive Expedition Voyage Fare	[0]	[0.00]	[0.00]
Pre-Cruise Luxury Hotel & Transfers	[0]	[0.00]	[0.00]
Port Taxes, Fees & Polar Permits	[0]	[0.00]	[0.00]

Subtotal [Currency] [0.00]
Deposit Paid ([0.00])
Total Balance Due [Currency] [0.00]

Payment Terms: Final balance must be settled 120 days prior to embarkation. Payments via Wire Transfer or Premium Credit Card.

Notice: All expeditions are subject to weather and ice conditions. Travel insurance with emergency medical evacuation coverage is mandatory for this voyage.

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