



# Passenger Details

## 4-night Taste of the Kimberley Broome to Broome

We ask all passengers to provide our office with the following information in order to assist us in making all arrangements pre and post cruise

Names of guests: \_\_\_\_\_

Cruise date: \_\_\_\_\_

- Date you will be arriving in Broome, flight number and arrival time:

\_\_\_\_\_

- Where you would like to be collected from on the Departure day for your transfer to MV Great Escape:

\_\_\_\_\_

- Any medical conditions? \_\_\_\_\_

\_\_\_\_\_

- T-shirt size: Ladies: 8, 10, 12, 14, 16, 18  
Mens: S, M, L, XL, XXL, XXXL

- Approximate height and weight: Passenger 1 \_\_\_\_\_  
(this information assists in organising flight transfers)  
Passenger 2 \_\_\_\_\_

- Mobile contact whilst you are travelling: \_\_\_\_\_

- Date you will be departing Broome, flight number and departure time:

\_\_\_\_\_

Many thanks for your co-operation.

We Strongly recommend Travel Insurance due to the kind of cruises we offer, the need for booking in advance and the adventure nature of the excursions. Being flown out of a remote location by helicopter or floatplane is a very expensive exercise. Travel Insurance offers peace of mind for both the client and the team at The Great Escape Charter Company.

**Please note:** Your insurance needs to cover you for cancellation, injury and being flown out of remote locations.

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# Special Requests and Dietary Requirements

The Great Escape Charter Company prides itself on looking after our guests to the best of our ability. To do this, it is essential that we know a little more about your special little needs, wants and habits before you board - as once we get lost in the Kimberley wilderness we can't stop anywhere to purchase that special little something you may need everyday to make your holiday more enjoyable!

## DIETARY REQUIREMENTS:

- Hyperglycaemic                       Lactose Intolerant                       Gluten Intolerant
- Other (please specify): \_\_\_\_\_
- What will you require? \_\_\_\_\_

## MEDICAL CONDITIONS REQUIRING SPECIAL FOOD NEEDS:

- Diabetic                       High Cholesterol                       Other: \_\_\_\_\_
- What will you require? \_\_\_\_\_

## FOOD ALLERGIES:

- Seafood (please specify): \_\_\_\_\_
- NUTS:  Peanuts                       Peanut oil                       Other \_\_\_\_\_
- Eggs  Fruit or Vegetables (please specify): \_\_\_\_\_
- Other (please specify): \_\_\_\_\_

## GENERAL:

- Do you prefer:                       Dairy                       Non-dairy
- Milk:                       Full cream                       Low fat                       Soy
  
- Are you a vegetarian?                       Yes                       No
- Are you a vegan?                       Yes                       No
- To what extent: \_\_\_\_\_
  
- Which of the following meats **will** you eat?  
 Beef                       Lamb                       Poultry                       Pork                       Kangaroo  
 Crocodile                       Buffalo                       Fish                       Other seafood
  
- Do you eat spicy food?                       Yes                       No  
    If yes, would you prefer:                       Mild                       Medium                       Hot
  
- Coffee:                       Instant                       Decaf                       Plunger
- Tea preference (herbal or other): \_\_\_\_\_

Please list any other special requests below (they don't have to be just food related):

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Please don't forget to ask the crew for anything you may be thinking of as we may just have it onboard. It may not be a highly used item and we store it away to help keep the decks tidy and clutter free.

Just don't forget to ask - the worse answer you can get is no!!