



## YACHT CHARTER PREFERENCE SHEET

To ensure that your charter yacht vacation is the best it can be, your captain and crew need to know as much about your charter preferences. PLEASE complete the following sheet, being as specific as possible. Remember that in the islands not all brand names or items are available, but be assured that the crew will do the best they can do to meet your requirements.

<b>Charter Yacht:</b>	
<b>Check in Date:</b>	
<b>Charter Contact:</b>	
<b>Contact Phone:</b>	

**CREW LIST** Please list all members of your charter party

	First Name	Middle Initial	Last Name	Date of Birth	Place of Birth	Nationality	Passport no.
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							



**AIRLINE INFORMATION:**

Arrival Date : \_\_\_\_\_ Arrival Time : \_\_\_\_\_

Airline and Flight No.: \_\_\_\_\_

Do you wish us to organize your transfer from the airport ? \_\_\_\_\_

Are you staying at a hotel prior to boarding ? \_\_\_\_\_

Hotel Name: \_\_\_\_\_

**MEDICAL PROBLEMS:** heart, epilepsy, diabetes, allergies etc.

Four horizontal bars for medical information input, alternating in light and medium gray shades.

**EXPERIENCE:** Please give a brief description of your group's sailing and chartering experience

Four horizontal bars for experience input, alternating in light and medium gray shades.

**ITINERARIES:**

Please state any preferred cruising areas and particular ports or anchorages you would like to visit, if not already discussed with your charterer broker. If you plan to rendezvous with another yacht or friends in a specific port, please confirm where and when.

Five horizontal bars for itinerary input, alternating in light and medium gray shades.



### CHARTER ACTIVITIES:

Please indicate your interests:

Sailing _____	Tours _____	Casinos _____	Water-skiing _____
Swimming _____	Snorkeling _____	Beach Walks _____	Wave Runners _____
SCUBA Diving _____	Windsurfing _____	Exercise _____	Music & Dancing _____
Shopping _____	Fishing _____	Parasailing _____	Docking at Marinas _____
Sunning _____	Beach combing _____	Dining Ashore _____	

### CELEBRATIONS ON BOARD:

Please advise any special event you would like to celebrate, e.g. birthday, wedding or anniversary.

**Name:** \_\_\_\_\_  
**Date:** \_\_\_\_\_  
**Occasion:** \_\_\_\_\_

### FOOD:

#### BREAKFAST:

- Continental
- English
- Cereals
- Fresh fruits
- Pastries
- Fresh fruit juices
- Juice
- Other: \_\_\_\_\_
- American
- Bread
- Yoghurt
- Oatmeal
- Milk
- Soy milk

**What time do you generally prefer breakfast to be served?**

- 6:30-8:30 am    8:30-10:30 am    10:30-11:30



### WARM BEVERAGES:

<ul style="list-style-type: none"><li>• Espresso</li></ul>	<ul style="list-style-type: none"><li>• Hot Chocolate</li></ul>
<ul style="list-style-type: none"><li>• Decaffeinated coffee</li></ul>	<ul style="list-style-type: none"><li>• Black Tea</li></ul>
<ul style="list-style-type: none"><li>• Tea</li></ul>	<ul style="list-style-type: none"><li>• Cappuccino</li></ul>
<ul style="list-style-type: none"><li>• Infusions (mint, chamomile)</li></ul>	

### MAIN MEALS:

**Lunch**       Family style                       Formal  
**Dinner**       Family style                       Formal

Please state food preferences

	Like	Dislike	Indifferent
Beef	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lamb	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Duck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Veal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seafood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shellfish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetarian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other \_\_\_\_\_  
\_\_\_\_\_

### PREFERRED MENUS/ DISHES:

Japanese                       Barbecue                       Local Cuisine  
 Italian cuisine               French cuisine               Asian  
 Indian  
 Other \_\_\_\_\_



Specialty food i.e. lobster, caviar, foie gras (please specify how often you would like any specialty food listed)

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### **DESSERTS:**

**In general do you prefer**

- Rich  Light  Low fat  
 Chocolate  Fruits / fruit based  
 Special requests: \_\_\_\_\_

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### **WOULD YOU LIKE**

Day time snacks (please specify preferred types of snacks) \_\_\_\_\_

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- Buffet/light lunches  Three course meal  Lunch  Dinner

### **SPECIAL DIETARY REQUIREMENTS:**

- Salt free  Low cholesterol  Low carbohydrate  
 Other \_\_\_\_\_  
 Allergies \_\_\_\_\_

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### **CHILDREN'S MENU:**

(Please mention brands and flavors as appropriate)

- Hot dogs/ Hamburgers etc.  Salads  
 Pasta dishes  Pizza  
 Other (please specify favorite dishes) \_\_\_\_\_

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Do the children have any special dietary requirements?

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**DO YOU OCCASIONALLY PLAN TO EAT ASHORE FOR:**

Lunch

Dinner

Please mention specific reservation you may have or would like to be made:

**BAR:** Please note approximate quantities and brands Soda, Juice, Mixers & Water

Type		Specific Brand	Quantity bottles	Quantity cases	REMARKS
Coke	0.5l				
Diet Coke	0.5l				
Sprite	0.5l				
Pepsi	0.5l				
Caffeine free drinks	0.5l				
Orange Juice	1.0l				
Grapefruit Juice	1.0l				
Apple Juice	1.0l				
Cranberry Juice	1.0l				
Tomato Juice	1.0l				
Tonic Water	1.5l				
Bottle water (still)	0.5l				
Bottle water (sparkling)	0.5l				
Soda water	1.5l				
Red Bull					
Monster					
Other					



## BEER

BRAND	Quantity 6-pack	BRAND	Quantity 6-pack
Bavaria		Budweiser	
Heineken		Budweiser dark	
Becks		Erdinger weiss	
Corona		Erdinger weiss dark	
Tuborg		Guinness	
Leffe blond		Raddler	
Leffe brown		Local Beer	

## SPIRITS

Gin		Rum	
Vodka		Jägermeister	
Whiskey		Aperol	
Campary		Other	

## WINE

Local \_\_\_\_\_ Imported \_\_\_\_\_

*Please indicate preferred kind and quantities:*

**RED WINE** \_\_\_\_\_

**WHITE WINE** \_\_\_\_\_

**CHAMPAGNE** \_\_\_\_\_

Special instructions for the crew regarding wine:

\_\_\_\_\_

**Will you require internet connection?**  Yes  No



Please list any other requirements or information that may be of use to the crew.

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**Other final considerations:**

Please list any other issues that have not been addressed or any other items that you would like to have onboard for your trip.

**Comments:**

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*Please limit your choices, as storage aboard your yacht is limited. Remember you are coming to the islands..... the crew will try their best, but occasionally certain requests and brands are just not available.*

*Gratuity (tips) of 10%-20% is customary and is given at the Charter's discretion. Gratuity (tips) is usually given to the Captain on the final day of the charter.*