

Phone #: (321) 784-4800 Fax #: (321) 784-4812

HOTEL SHUTTLE RESERVATION & ITINERARY

X \$45 PERSON

Please fill out <u>all</u> of the necessary fields below. You may use your "TAB Key" to navigate through the form. Once you have completed the form, please save it to a location that you can easily retrieve it from and attach it to an e-mail back to us. E-mail the completed form to Shuttle@courtyardcb.com If you are having problems with the form please contact us at (321) 784-4800.

Once we receive your Itinerary back it will be forwarded to Cocoa Beach Shuttle for confirmation. They will then e-mail you a confirmation letter that you will need in order to board the shuttle. It will also contain information about where to meet the shuttle once you have landed. Please note we must have a cell phone number for Shuttle Service to contact you in case of emergency.

GUEST NAME				CONFIRM	ATION NUMBER	
CELL NUMBER (numerical charact				Group (If ap	Name plicable)	
EMAIL						
RRIVAL DATE		AIRPORT	MCO	# OF GUESTS	DROP OF LOCA	TION: Courtyard Cocoa Beac
AIRLINE		FLIGHT#			ARRIVAL TIME	
There	is an additional ch		p at a different ai ick up before 7A		MCO, and an additional c	charge of \$25 for
TRANSPORT TO	O PORT CANAVE	RAL	IF YESDA	ATE		Cruise Shuttles have
CRUISE SHIP [Cruise Shuttle	Times. Please check on 11:15am 12:15p	le limited seating. If the time you selected is full you will be
	SPORT TO HOTEI al \$5 fee per person	NEEDED	RETU	RN DATE		assigned to the next shuttle.
DEPARTURE D	ATE	PICKUP H CRUISE SI				
FLIGHT DEPARTURE	TIME	AIRLII	NE		FLIGHT#	
There is a	an additional charg		up at a different a op off before 7AM		MCO, and an additional	charge of \$25 for
SPECIAL REQU	IIREMENTS:					
ASSENGER HA	AS WHEELCHAIR	C	AN WHEELCHAI	R FOLD UP		
OF BOOSTER	SEATS NEEDED	# (OF CAR SEATS N	EEDED	# OF SURFB	OARDS
ADDITIONAL INFORMATION	l:					

OF PASSENGERS