

Guest's Name: _____

Cabin Number: _____

Ship: Summit

Departure Date: February 24, 2018

E-mail: _____

Telephone: _____

Stateroom is handicap accessible: YES NO

I will be with someone who will provide me with the assistance I require: YES NO

Assistant's Name: _____ Relationship: _____ Cabin: _____

Our records indicate that accessible facilities and/or services may be required due to a disability. Please review and complete this form by **November 30, 2017** in order for specific arrangements to be made. This information is necessary so that we are aware of any special requirements you have. Celebrity Cruise Lines will seek to the extent feasible to accommodate all passengers. This information may be provided to third parties as needed. **IF YOU HAVE ANY QUESTIONS REGARDING THIS FORM, PLEASE CALL ANDREA SAVICKIS AT (844) 700-3569, OR SEND AN EMAIL TO ANDREAS@STARVISTALIVE.COM.**
This form can be faxed to 313-565-3621.

Mobility

- Wheelchair for embarkation and disembarkation Cannot ascend/descend steps into a bus/motor coach
- I require special table accommodations at dinner (please specify: _____)

Equipment				
Please complete all dimensions so we may ensure that your device can be accommodated in the stateroom and if applicable, for transfers and shore excursions.				
Are you bringing a...	Is it...	Battery type?	Equipment Dimensions	Combined Dimensions (guest & equipment)
<input type="checkbox"/> Manual wheelchair	<input type="checkbox"/> Folding	<input type="checkbox"/> Gel	Width: _____	
<input type="checkbox"/> Power wheelchair	<input type="checkbox"/> Non-folding	<input type="checkbox"/> Dry	Length: _____	
<input type="checkbox"/> Mobility Scooter		<input type="checkbox"/> Wet	Height: _____	Height : _____
			Weight (lbs): _____	Weight (lbs): _____

Note: At certain ports of call, gangway and tender conditions may make it difficult for equipment to be taken on or off the ship. Power wheelchairs and mobility scooters may not be taken on tenders unless roll-on capability is available. For more information see www.CelebrityCruises.com/TenderAccess

Stateroom Accommodations (on the ship)

Accessible stateroom with roll-in shower required? Yes No

If you already have an accessible stateroom, please sign below:

I require an accessible stateroom because I have a mobility disability or other disability that requires the use of the accessible features that are provided in the stateroom.

Signature: _____

- Raised toilet seat
- Shower stool
- Commode chair

Guest's Name: _____

Cabin Number: _____

Accessible Shore Excursions

Would you like to book accessible shore excursions? Yes No

If yes, contact our Accessible Shore Excursions team at shorexaccess@rccl.com or (866) 592-7225 to arrange your excursions. (Monday-Friday 9am-7pm Eastern Time)

Can you do minimal walking? Yes No Distance: _____

Are you traveling with a companion who can assist you? Yes No

Are you able to transfer from wheelchair to a seat? Yes No

Note: The above information will be passed along to our Accessible Shore Excursions team. Be sure to complete the Equipment Section above so we can ensure the tour operator will be able to accommodate your device.

Low Vision / Blind

Large Print menus and daily activity planners Blind

Service Dog

Bringing a service dog Prefer sod if available

Policies: Guests are responsible for obtaining required permits for service dogs to depart the ship in non-U.S. ports. A copy of these permits must be carried with you onboard the ship. A 4 foot by 4 foot relief area with cypress mulch will be provided; please note that the Lawn Club on Solstice class ships is not a designated relief area. Sod for cruises from the U.S. can be provided if ordered in advance – please specify above.

Hard of Hearing / Deaf

Sign language interpreting services TTY (teletypewriter) in stateroom Stateroom visual-tactile alert system for door knocking, smoke detector and telephone ringing
 ASL (American Sign Language) Assistive Listening Device
 Tactile

Policies: Requests for sign language interpreting services should be made at time of booking, but no later than 60 days prior to sailing. Please note requests are subject to availability of interpreters. Sign language interpreting services are provided on cruises to and from the U.S. and Canada, however SSP (Support Service Provider) services are not provided.

Medication

Refrigerator in your stateroom (empty) Sharp's container for syringe disposal

Oxygen

Bringing oxygen onboard Oxygen delivered by an outside vendor

Vendor Name / Phone Number / Fax Number _____

Sleep Apnea

Bringing a CPAP or BIPAP machine (distilled water and extension cord will be provided, but we recommend bringing your own extension cord if possible)

Guest's Name: _____

Cabin Number: _____

Dialysis

Require *Peritoneal Dialysis*. Supplies delivered by an outside vendor.

Vendor Name / Phone Number / Fax Number _____

Note: If you require hemo-dialysis, please contact our Access Department for assistance.

Medical Related and/or Dietary Requests

Regular Soy Milk

Regular Lactose-free Milk

Vanilla Ensure® Qty ____ cans (8-fl oz)

Kosher Meals

Vegan Meals

Diabetic

Vegetarian Meals

Other (to include allergies) _____

Pregnant Guests

I am ____ weeks pregnant

Policy: Pregnant guests must be under 24 weeks and have a fit to travel note from their physician. For more information, see www.CelebrityCruises.com/PregnancyPolicy

Infants

I have an infant that is ____ months old

Policy: Infants must be at least 6 months old on most cruises (12 months on select cruises). For more information, see www.CelebrityCruises.com/AgePolicy

Special Assistance Form for Entry (S.A.F.E.)

I would like to request admittance to the theater as part of the SAFE seating program. Yes No

I can leave my wheelchair for seating at the nightly shows: Yes No

I cannot navigate steps (need to stay on flat surface): Yes No

****Please note: SAFE applications must be accompanied by a doctor's note and/or handicap placard. All SAFE seats will be located at the back of the theater. SAFE guests may enter after General Admission guests have been seated.****

Other Disability Related Needs including Allergies (food and non-food related)

Please note we are unable to guarantee an allergy-free environment, however we can make reasonable accommodation(s) for your allergies. **Not all disability and dietary requests may be able to be accommodated.**

