



**International Barter Exchange, Inc.**

*Profit Through the Power of Exchange*

P. O. Box 1986

Sarasota, FL 34230-1986

Phone (941) 955-6100 / Fax (941) 955-0151

email: [ibe@gte.net](mailto:ibe@gte.net) [www.barter-works.com](http://www.barter-works.com)

---

**CRUISE RESERVATION CONFIRMATION**

COMPANY NAME: \_\_\_\_\_ IBE™ ACCOUNT NUMBER: \_\_\_\_\_

RESERVATION NAME(S): \_\_\_\_\_  
(As they appear on passport)

SHIP NAME & COMPANY: \_\_\_\_\_ # OF DAYS: \_\_\_\_\_

<b>DEPARTURE INFORMATION:</b> DATE: _____ TIME: _____ DEPARTING FROM: _____	<b>RETURN INFORMATION:</b> DATE: _____ TIME: _____ RETURNING TO: _____
---	--

ITINERARY: \_\_\_\_\_

# OF ROOMS: \_\_\_\_\_ # OF ADULTS: \_\_\_\_\_ # OF CHILDREN: \_\_\_\_\_ TYPE: \_\_\_\_\_

CATEGORY: \_\_\_\_\_ CABIN: INSIDE / OUTSIDE VIEW: \_\_\_\_\_

TABLE FOR: \_\_\_\_\_  
NON-SMOKING / SMOKING DINING TIME: \_\_\_\_\_

SPECIAL INSTRUCTIONS/REQUIREMENTS: \_\_\_\_\_

CRUISE RATE: \_\_\_\_\_ PER PERSON

TOTAL BARTER AMOUNT \$ \_\_\_\_\_

IBE™ PERCENTAGE \$ \_\_\_\_\_ PAID BY: \_\_\_\_\_

\*\*\*PORT CHARGES, TAXES AND OTHER INCIDENTALS MUST BE PAID IN CASH\*\*\*