

Who is your Certified Travel Concierge?

First Name:

Email:

Phone:

Your Preferences

What date would you like to depart? :

From which airport would you like to depart?

How many nights would you like to stay?

How many adults?

How many children?

Have you looked at any destinations and/or hotels? :

Yes No

Are you pool or beach people:

Beach Pool Both

Do you want to go to an all-inclusive resort?

Yes No Unsure

Have you travelled outside the country before?:

Yes No

Have the kids flown and also travelled outside the country?:

Yes No

What is the most important aspect of your vacation?:

(check all that apply)

Room Layout

Small Hotel Size

Large Hotel Size

Kids Club

All-Inclusive

Other

What types of activities would you like?

(check all that apply)

Great Pools

Great Beach

Swimming in the Ocean

Non Motorized Water Sports

Tours Outside the Hotel Available

Other

Tell us about your favorite vacation or life experience.

Quality Time Spent Together

Enjoyed Activities Available

Enjoyed Experiencing the Culture

Other

What made your favorite vacation or life experience memorable?

What was your worst travel experience?

Flight Issues

Hotel Food

Hotel Service

Other

What ages are your children?

Child 1 Age:

Does anyone have any hobbies and/or special interests?

Sports

Music

Animals

Volunteering

Architecture

Food

Wine/Beer/Spirits

Other

Any health and/or dietary needs?

Vegetarian

Vegan

Gluten Free

Other