

**THIS CRUISE
JOURNAL
BELONGS TO:**

CRUISE SAVINGS

WE'RE SAVING FOR: _____

AMOUNT NEEDED: _____

OUR GOAL DATE:



DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:[illegible]

CRUISE SAVINGS

DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:

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CRUISE DETAILS

NOTES

TO DO:

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CRUISE DETAILS & REMINDERS:

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CRUISE COUNTDOWN

MONTH: _____ **YEAR:** _____

[illegible]

FLIGHT INFORMATION

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

CRUISE PACKING CHECKLIST

[illegible]

CRUISE PACKING CHECKLIST

CLOTHING FOR HER		✓	CLOTHING FOR HIM		✓
ESSENTIALS		✓	FOR THE JOURNEY		✓
	IMPORTANT DOCUMENTS				✓

CRUISE PACKING CHECKLIST

CLOTHING FOR HER ✓		CLOTHING FOR HIM ✓	
T-Shirts &, Tank Tops & Blouses		T-Shirts & Tank Tops	
Sundresses		Shorts	
Flip Flops, Sandals & Heels		Swim Wear	
Shorts & Pants		Jeans, Khakis	
Swimsuit & Cover Up		Formal Attire (dress shirt, shoes, etc.)	
T-Shirts &, Tank Tops & Blouses		Belt	
Aqua/Swimming Shoes		Tie	
Bras, Panties & Socks		Sandals / Sneakers	
Sunhat		Visor, Baseball Cap	
Sunglasses		T-Shirts &, Tank Tops & Blouses	
Formal Attire		Sunglasses	
Jewelry		Socks & Underwear	
ESSENTIALS ✓		FOR THE JOURNEY ✓	
Lanyard		Carry On Bag	
Suntan Lotion		Cash / Local Currency	
Medication (motion sickness, etc.)		Credit Cards	
Travel Mug / Water Bottle		Phone Charger	
		Backpack	
	IMPORTANT DOCUMENTS ✓		
		Passport & ID	
		Cruise Documents & Boarding Pass	
		Flight Information	

CRUISE EXCURSION PLANNER

ACTIVITY / EXCURSION OVERVIEW:

EST COST OF EXCURSION: _____

INCLUSIONS:



EXCLUSIONS:



FOOD & DRINK:

☐

☐

TRANSPORTATION:

☐

☐

GRATUITY:

☐

☐

ACTUAL COST:

IMPORTANT INFORMATION:

CONTACT: _____ PHONE #: _____

MEET UP TIME: _____ WHAT TO BRING: _____

ADDRESS: _____

CRUISE PORT PLANNER

DESTINATION:

DATE:

THINGS TO DO / SEE:

☐☐☐☐☐☐☐

WHERE TO EAT:

☐☐☐☐☐☐☐

TRANSPORTATION DETAILS:

☐☐☐☐☐

OTHER INFORMATION:

☐☐☐☐☐

RETURN TO SHIP BY:

ALL ABOARD!

PRE-CRUISE TO DO LIST & CHECKLIST

1 MONTH BEFORE

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

2 WEEKS BEFORE

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

1 WEEK BEFORE

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

2 DAYS BEFORE

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

24 HOURS BEFORE

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

DAY OF TRAVEL

<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____
<input type="checkbox"/>	_____

CRUISE PLANNER

WEEK OF:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
TO DO	TO DO	TO DO	TO DO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEALS	MEALS	MEALS	MEALS
FRIDAY	SATURDAY	SUNDAY	NOTES
TO DO	TO DO	TO DO	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MEALS	MEALS	MEALS	

CRUISING TO DO LIST

CRUISE BUCKET LIST

PLACES I WANT TO VISIT:

[illegible]

TOP 3 DESTINATIONS:

THINGS I WANT TO SEE:

[illegible]

CRUISE ITINERARY

Monday

Tuesday

Wednesday

thursday

Friday

Saturday

Sunday

MONTH:

DAILY ACTIVITY PLANNER

DAILY ITINERARY

ACTIVITY: _____

TIME: _____

LOCATION: _____

WEATHER:     

MEAL PLANNER

DAILY EXPENSES

TOTAL COST:

TOP ACTIVITIES

TIME:

SCHEDULE:

NOTES:

CRUISE FRIENDS

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

CABIN #: _____

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

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There's Nothing Like Cruising Life!

CRUISE FRIENDS

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There's Nothing Like Cruising Life!

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There's Nothing Like Cruising Life!

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CABIN #: _____

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ADDRESS: _____

CABIN #: _____

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

CABIN #: _____

There's Nothing Like Cruising Life!

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE JOURNAL

DATE:

What I Did Today:

Highlight of the Day:

Thoughts & Reflections:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Time
for
Travel

CRUISE SAVINGS

WE'RE SAVING FOR: _____

AMOUNT NEEDED: _____

OUR GOAL DATE:



DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:[illegible]

CRUISE SAVINGS

DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:

[illegible]

CRUISE DETAILS

NOTES

TO DO:

CRUISE DETAILS & REMINDERS:

CRUISE COUNTDOWN

MONTH: _____ **YEAR:** _____

[illegible]

FLIGHT INFORMATION

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

CRUISE PACKING CHECKLIST

[illegible]

CRUISE PACKING CHECKLIST

CLOTHING FOR HER		✓	CLOTHING FOR HIM		✓
ESSENTIALS		✓	FOR THE JOURNEY		✓
	IMPORTANT DOCUMENTS				✓

CRUISE PACKING CHECKLIST

CLOTHING FOR HER ✓		CLOTHING FOR HIM ✓	
T-Shirts &, Tank Tops & Blouses		T-Shirts & Tank Tops	
Sundresses		Shorts	
Flip Flops, Sandals & Heels		Swim Wear	
Shorts & Pants		Jeans, Khakis	
Swimsuit & Cover Up		Formal Attire (dress shirt, shoes, etc.)	
T-Shirts &, Tank Tops & Blouses		Belt	
Aqua/Swimming Shoes		Tie	
Bras, Panties & Socks		Sandals / Sneakers	
Sunhat		Visor, Baseball Cap	
Sunglasses		T-Shirts &, Tank Tops & Blouses	
Formal Attire		Sunglasses	
Jewelry		Socks & Underwear	
ESSENTIALS ✓		FOR THE JOURNEY ✓	
Lanyard		Carry On Bag	
Suntan Lotion		Cash / Local Currency	
Medication (motion sickness, etc.)		Credit Cards	
Travel Mug / Water Bottle		Phone Charger	
		Backpack	
		IMPORTANT DOCUMENTS ✓	
		Passport & ID	
		Cruise Documents & Boarding Pass	
		Flight Information	

CRUISE EXCURSION PLANNER

ACTIVITY / EXCURSION OVERVIEW:

EST COST OF EXCURSION: _____

INCLUSIONS:



EXCLUSIONS:



FOOD & DRINK:

☐

☐

TRANSPORTATION:

☐

☐

GRATUITY:

☐

☐

ACTUAL COST:

IMPORTANT INFORMATION:

CONTACT: _____ PHONE #: _____

MEET UP TIME: _____ WHAT TO BRING: _____

ADDRESS: _____

CRUISE PORT PLANNER

DESTINATION:

DATE:

THINGS TO DO / SEE:

☐☐☐☐☐☐☐

WHERE TO EAT:

☐☐☐☐☐☐☐

TRANSPORTATION DETAILS:

☐☐☐☐☐

OTHER INFORMATION:

☐☐☐☐☐

RETURN TO SHIP BY:

ALL ABOARD!

PRE-CRUISE TO DO LIST & CHECKLIST

1 MONTH BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

1 WEEK BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

24 HOURS BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

2 WEEKS BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

2 DAYS BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

DAY OF TRAVEL

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

CRUISE PLANNER

WEEK OF:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
TO DO	TO DO	TO DO	TO DO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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MEALS	MEALS	MEALS	MEALS
FRIDAY	SATURDAY	SUNDAY	NOTES
TO DO	TO DO	TO DO	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MEALS	MEALS	MEALS	MEALS

CRUISING TO DO LIST

CRUISE BUCKET LIST

PLACES I WANT TO VISIT:

[illegible]

TOP 3 DESTINATIONS:

THINGS I WANT TO SEE:

[illegible]

CRUISE ITINERARY

Monday

Tuesday

Wednesday

thursday

Friday

Saturday

Sunday

MONTH:

CRUISE ACTIVITIES

WEEKLY ACTIVITY TRACKER:

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DAILY ACTIVITY PLANNER

DAILY ITINERARY

ACTIVITY: _____

TIME: _____

LOCATION: _____

WEATHER:     

MEAL PLANNER

DAILY EXPENSES

TOTAL COST:

TOP ACTIVITIES

TIME:

SCHEDULE:

NOTES:

CRUISE FRIENDS

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

CABIN #: _____

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There's Nothing Like Cruising Life!

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CABIN #: _____

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

CABIN #: _____

There's Nothing Like Cruising Life!

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE JOURNAL

DATE:

What I Did Today:

Highlight of the Day:

Thoughts & Reflections:

[illegible]

Time
for
Travel

CRUISE SAVINGS

WE'RE SAVING FOR: _____

AMOUNT NEEDED: _____

OUR GOAL DATE:



DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:[illegible]

CRUISE SAVINGS

DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:

[illegible]

CRUISE DETAILS

NOTES

TO DO:

CRUISE DETAILS & REMINDERS:

CRUISE COUNTDOWN

MONTH: _____ **YEAR:** _____

[illegible]

FLIGHT INFORMATION

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
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DATE: _____ DESTINATION: _____

AIRLINE:	
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CRUISE PACKING CHECKLIST

[illegible]

CRUISE PACKING CHECKLIST

CLOTHING FOR HER	✓	CLOTHING FOR HIM	✓
ESSENTIALS	✓	FOR THE JOURNEY	✓
	IMPORTANT DOCUMENTS		✓

CRUISE PACKING CHECKLIST

CLOTHING FOR HER ✓		CLOTHING FOR HIM ✓	
T-Shirts &, Tank Tops & Blouses		T-Shirts & Tank Tops	
Sundresses		Shorts	
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Swimsuit & Cover Up		Formal Attire (dress shirt, shoes, etc.)	
T-Shirts &, Tank Tops & Blouses		Belt	
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Bras, Panties & Socks		Sandals / Sneakers	
Sunhat		Visor, Baseball Cap	
Sunglasses		T-Shirts &, Tank Tops & Blouses	
Formal Attire		Sunglasses	
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ESSENTIALS ✓		FOR THE JOURNEY ✓	
Lanyard		Carry On Bag	
Suntan Lotion		Cash / Local Currency	
Medication (motion sickness, etc.)		Credit Cards	
Travel Mug / Water Bottle		Phone Charger	
		Backpack	
		IMPORTANT DOCUMENTS ✓	
		Passport & ID	
		Cruise Documents & Boarding Pass	
		Flight Information	

CRUISE EXCURSION PLANNER

ACTIVITY / EXCURSION OVERVIEW:

EST COST OF EXCURSION: _____

INCLUSIONS:



EXCLUSIONS:



FOOD & DRINK:

☐

☐

TRANSPORTATION:

☐

☐

GRATUITY:

☐

☐

ACTUAL COST:

IMPORTANT INFORMATION:

CONTACT: _____ PHONE #: _____

MEET UP TIME: _____ WHAT TO BRING: _____

ADDRESS: _____

CRUISE PORT PLANNER

DESTINATION:

DATE:

THINGS TO DO / SEE:

☐☐☐☐☐☐☐

WHERE TO EAT:

☐☐☐☐☐☐☐

TRANSPORTATION DETAILS:

☐☐☐☐☐

OTHER INFORMATION:

☐☐☐☐☐

RETURN TO SHIP BY:

ALL ABOARD!

PRE-CRUISE TO DO LIST & CHECKLIST

1 MONTH BEFORE

- ☐ _____
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- ☐ _____
- ☐ _____
- ☐ _____

1 WEEK BEFORE

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24 HOURS BEFORE

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2 WEEKS BEFORE

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- ☐ _____
- ☐ _____
- ☐ _____

2 DAYS BEFORE

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

DAY OF TRAVEL

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

CRUISE PLANNER

WEEK OF:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
TO DO	TO DO	TO DO	TO DO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEALS	MEALS	MEALS	MEALS
FRIDAY	SATURDAY	SUNDAY	NOTES
TO DO	TO DO	TO DO	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MEALS	MEALS	MEALS	MEALS

CRUISING TO DO LIST

CRUISE BUCKET LIST

PLACES I WANT TO VISIT:

[illegible]

TOP 3 DESTINATIONS:

THINGS I WANT TO SEE:

[illegible]

CRUISE ITINERARY

Monday

Tuesday

Wednesday

thursday

Friday

Saturday

Sunday

MONTH:

DAILY ACTIVITY PLANNER

DAILY ITINERARY

ACTIVITY: _____

TIME: _____

LOCATION: _____

WEATHER:     

MEAL PLANNER

DAILY EXPENSES

TOTAL COST:

TOP ACTIVITIES

TIME:

SCHEDULE:

NOTES:

CRUISE FRIENDS

FRIENDS ARE
FOREVER

NAME: _____

PHONE NUMBER: _____

ADDRESS: _____

CABIN #: _____

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There's Nothing Like Cruising Life!

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There's Nothing Like Cruising Life!

MY CRUISE AGENDA

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MY CRUISE JOURNAL

DATE:

What I Did Today:

Highlight of the Day:

Thoughts & Reflections:

[illegible]

Time
for
Travel

CRUISE SAVINGS

WE'RE SAVING FOR: _____

AMOUNT NEEDED: _____

OUR GOAL DATE:



DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:[illegible]

CRUISE SAVINGS

DEPOSIT TRACKER

AMOUNT DEPOSITED:

DATE DEPOSITED:

[illegible]

CRUISE DETAILS

NOTES

TO DO:

CRUISE DETAILS & REMINDERS:

CRUISE COUNTDOWN

MONTH: _____ **YEAR:** _____

[illegible]

FLIGHT INFORMATION

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

DATE: _____ DESTINATION: _____

AIRLINE:	
BOOKING NUMBER:	
DEPARTURE DATE:	
BOARDING TIME:	
GATE NUMBER:	
SEAT NUMBER:	
ARRIVAL / LANDING TIME:	

CRUISE PACKING CHECKLIST

[illegible]

CRUISE PACKING CHECKLIST

CLOTHING FOR HER		✓	CLOTHING FOR HIM		✓
ESSENTIALS		✓	FOR THE JOURNEY		✓
	IMPORTANT DOCUMENTS				✓

CRUISE PACKING CHECKLIST

CLOTHING FOR HER ✓		CLOTHING FOR HIM ✓	
T-Shirts &, Tank Tops & Blouses		T-Shirts & Tank Tops	
Sundresses		Shorts	
Flip Flops, Sandals & Heels		Swim Wear	
Shorts & Pants		Jeans, Khakis	
Swimsuit & Cover Up		Formal Attire (dress shirt, shoes, etc.)	
T-Shirts &, Tank Tops & Blouses		Belt	
Aqua/Swimming Shoes		Tie	
Bras, Panties & Socks		Sandals / Sneakers	
Sunhat		Visor, Baseball Cap	
Sunglasses		T-Shirts &, Tank Tops & Blouses	
Formal Attire		Sunglasses	
Jewelry		Socks & Underwear	
ESSENTIALS ✓		FOR THE JOURNEY ✓	
Lanyard		Carry On Bag	
Suntan Lotion		Cash / Local Currency	
Medication (motion sickness, etc.)		Credit Cards	
Travel Mug / Water Bottle		Phone Charger	
		Backpack	
	IMPORTANT DOCUMENTS ✓		
		Passport & ID	
		Cruise Documents & Boarding Pass	
		Flight Information	

CRUISE EXCURSION PLANNER

ACTIVITY / EXCURSION OVERVIEW:

EST COST OF EXCURSION: _____

INCLUSIONS:



EXCLUSIONS:



FOOD & DRINK:

☐

☐

TRANSPORTATION:

☐

☐

GRATUITY:

☐

☐

ACTUAL COST:

IMPORTANT INFORMATION:

CONTACT: _____ PHONE #: _____

MEET UP TIME: _____ WHAT TO BRING: _____

ADDRESS: _____

CRUISE PORT PLANNER

DESTINATION:

DATE:

THINGS TO DO / SEE:

☐☐☐☐☐☐☐

WHERE TO EAT:

☐☐☐☐☐☐☐

TRANSPORTATION DETAILS:

☐☐☐☐☐

OTHER INFORMATION:

☐☐☐☐☐

RETURN TO SHIP BY:

ALL ABOARD!

PRE-CRUISE TO DO LIST & CHECKLIST

1 MONTH BEFORE

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

1 WEEK BEFORE

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

24 HOURS BEFORE

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

2 WEEKS BEFORE

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

2 DAYS BEFORE

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

DAY OF TRAVEL

☐ _____

☐ _____

☐ _____

☐ _____

☐ _____

CRUISE PLANNER

WEEK OF:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY
TO DO	TO DO	TO DO	TO DO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MEALS	MEALS	MEALS	MEALS
FRIDAY	SATURDAY	SUNDAY	NOTES
TO DO	TO DO	TO DO	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MEALS	MEALS	MEALS	MEALS

CRUISING TO DO LIST

CRUISE BUCKET LIST

PLACES I WANT TO VISIT:

[illegible]

TOP 3 DESTINATIONS:

THINGS I WANT TO SEE:

[illegible]

CRUISE ITINERARY

Monday

Tuesday

Wednesday

thursday

Friday

Saturday

Sunday

MONTH:

CRUISE ACTIVITIES

WEEKLY ACTIVITY TRACKER:

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DAILY ACTIVITY PLANNER

DAILY ITINERARY

ACTIVITY: _____

TIME: _____

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WEATHER:     

MEAL PLANNER

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