



perfect yachts

Crewed Yacht Preference

GENERAL INFORMATION

For how many of your crew this is going to be the first sailing vacation experience?

Are there any guests on board who do not swim?

Are there any specific places you would like to visit while on board?

Are you active and like to keep busy?

Do you prefer relaxing and quiet enjoyment?

Do you prefer taking each day as it comes?

CREW INTERACTION

We want the crew to mingle with us

We prefer our privacy

A little of both

ACTIVITIES	No. of people interested	ACTIVITIES	No. of people interested
Sailing		Reading	
Snorkelling		Sunbathing	
Scuba diving		Go to beaches	
Kayaking		Shopping	
Waterskiing		Napping	
Swimming		Partying	
Hiking		Board games	
Fishing		Docking at Marinas	
Dining ashore		Other	

Activities not supplied by the yacht, can be arranged upon request

SPECIAL OCCASION

Birthday, Anniversary, Honeymoon,

Birthday, Anniversary, Honeymoon,

Name

Name

Date

Date

Comment

Comment

MEDICAL CONDITIONS

Any medical conditions the crew should know about e.g. Epilepsy, Heart disease, Special assistance

FOOD PREFERENCES

Please make a few notes as to how you prefer your meals to allow the chef to accommodate your tastes. Please be as specific as possible, i.e. Brands & quantities. Whenever possible the exact requests will be placed on board, however substitutions may be necessary. Is there anyone in your group that is allergic to a certain food type or for religious or preferential reasons does not eat any type of food? Eg. kosher, vegetarian, low carb, low sodium, low sugar. Please enter below.

Does any one in the Charter Party have food allergies or dietary requirements?

Name	Allergy or dietary requirements

Meal Times

What time do you prefer to eat?

Breakfast	6-8am	8-10am	10-12am
Lunch	12-1pm	1-2am	2-3pm
Dinner	7-8pm	8-9pm	9-10pm

--Breakfast Preferences--

White Bread <input type="checkbox"/>	Bacon <input type="checkbox"/>	Croissant <input type="checkbox"/>	Cream Cheese <input type="checkbox"/>	Other:
Whole -grain Bread <input type="checkbox"/>	Sausage <input type="checkbox"/>	Pancake <input type="checkbox"/>	Honey <input type="checkbox"/>	
French toast <input type="checkbox"/>	Ham <input type="checkbox"/>	Muffin <input type="checkbox"/>	Cereals <input type="checkbox"/>	
Whole Milk <input type="checkbox"/>	Potatoes <input type="checkbox"/>	Butter <input type="checkbox"/>	Jelly <input type="checkbox"/>	
Low-fat Milk <input type="checkbox"/>	Eggs <input type="checkbox"/>	Cheese <input type="checkbox"/>	Jam <input type="checkbox"/>	

--Lunch--

Do you prefer a light or heavy lunch?

How do you like your lunch served?

Plate Service:

Buffet Style:

Do you prefer your food to be: Baked Grilled Fried Steamed

Please check your preferences, add specific preparations where necessary

FOOD	SPECIAL LIKES	DISLIKES
Beef		
Pork		
Lamp		
Veal		
Chicken		
Turkey		
Duck		
Shellfish		
Fish		
Vegeterian		
Pasta		
Local Cuisine		
Desserts		
Snacks		
Casual food ie: Burgers		
Other		
Other		

Additional Information:

--Dinner--

How do you like your dinner served?

Plate Service:

Buffet Style:

Do you prefer dinner to be formal?

Yes No

Do you enjoy Theme nights?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Would you like appetitifs and canapes before dinner?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Would you like to have starters before dinner?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Would you like to have cheese and biscuits?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you like salads with dinner?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Do you enjoy desserts after dinner - Please be specific:

Pies	
Cakes	
Ice Cream	
Fruit	
Chocolates	
Tiramisu	
Mousse	
Other	
Other	

Is there anything you can't live without?

How many meals do you plan having ashore during your charter?

DRINKS

Please note your preferable drinks, and approximate quantity.

MILK	Whole	<input type="checkbox"/>	Semi-Skimmed	<input type="checkbox"/>	Skimmed	<input type="checkbox"/>	Soya	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

COFFEE	Decaffeinated	<input type="checkbox"/>	Espresso	<input type="checkbox"/>	Regular	<input type="checkbox"/>	Greek	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

TEA	Earl Gray	<input type="checkbox"/>	English Breckfast	<input type="checkbox"/>	Herbal	<input type="checkbox"/>	Ice Tea	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

WATER	Sparkling	<input type="checkbox"/>	Evian	<input type="checkbox"/>	San Pellegrino	<input type="checkbox"/>	Still	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

JUICE	Orange	<input type="checkbox"/>	Pineapple	<input type="checkbox"/>	Grapefruit	<input type="checkbox"/>	Apple	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

SOFT DRINKS	Coke	<input type="checkbox"/>	Diet Coke	<input type="checkbox"/>	Sprite	<input type="checkbox"/>	Lemonade	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

BEER	Budweiser	<input type="checkbox"/>	Corona	<input type="checkbox"/>	Heineken	<input type="checkbox"/>	Mythos	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Additional Comments

--WINE--

White								Price Range/ per bottle:			
Chardonnay		Sauvignon Blanc			Moscato						
Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>		Local	<input type="checkbox"/>	Foreign

Red							Price Range/ per bottle:				
Merlot		Cabernet Sauvignon			Pinot Noir						
Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>
Rose							Price Range/ per bottle:				
Syrah Rose		Grenache			Sangiovese						
Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>	Local	<input type="checkbox"/>	Foreign	<input type="checkbox"/>

--SPIRITS--		
Kind	Quantity	Brand
Whisky		
Brandy		
Gin		
Vodka		
Rum		
Liqueur		
Tequila		
Cognac		
Liqueur (Traditional Mastic, Cointreau etc)		
Vermouth		
Aperitif (Traditional Limoncello, Aperol etc)		

--CHAMPAGNE--	
Brand	Quantity
Dom Perignon	
Veuve Clicquot	
Moet et Chandon	
Other:	

FOR KIDS ONLY

Name		Age	
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I like:

I don't like:

Cold Drinks:

Snaks:

Favourite activity:

Additional Notes:

Name		Age	
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I don't like:

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Snaks:

Favourite activity:

Additional Notes:

RECOMMENDATIONS

Luggage: use of soft and foldable luggage, rather than hard suitcases (it is easier to store on the yacht and prevent damage).

Please provide us with any additional information required, to organize your Perfect Vacations

Looking forward to welcoming you!