A-ROSA CLUB

Registration Form





A-ROSA Flussschiff GmbH c/o A-ROSA Kundenclub Loggerweg 5 18055 Rostock Germany

		nboard A-ROS r of the A-ROS	SA at least two time SA Club.	es and would like
☐ Mr ☐	Mrs	S		
Surname		First Name		Date of Birth
Street & Number		Postcode	City, Country	
Phone (during daytime)		Email		
Please list your lass and acceptance in			nformation is mandatory t	o process your registration
Cruise Ship	Travel Period	Travel Period		
Cruise Ship	Travel Period	Travel Period		
I agree that the ab in accordance with				e A-ROSA Flussschiff GmbH
Place, Date	Signatur	e		

Please complete the form and send it to the above mentioned address or by fax to + 49(0) 381 202 6002.