

SPECIAL NEEDS FORM

MSC Crociere is sensitive to its passengers' needs and constantly strives to offer the best possible service in accordance with all the relevant international standards. To enable us to provide a service that is tailored to your particular requirements, we kindly ask you to read this form carefully and duly complete it at the time of booking. This will allow us to prearrange your arrival on board so that your accommodation is as comfortable as possible, and to inform you about life on board your chosen vessel and any potential difficulties you may encounter. Every effort has been made to ensure that the content of this form is accurate; however, MSC Crociere advises you to check with your travel agent for the most up to date information.

BOOKING Nr.:			
APPLICANT'S NAME AND SURNAM	1E:		
DATE AND PLACE OF BIRTH:			
ADDRESS:			
CONTACT DETAILS (phone, e-mail, e	etc.):		
	_PER (if required):nding on the passenger's degree of autonomy and cl		
responsibility, or by the guardian, detail	r incapable, this form should be completed and sign s of whom must be provided.		
ADDRESS:			
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL:	DATE OF DEPARTURE:		
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE:	DATE OF DEPARTURE:	□ CRUISE A	.ND FLIGHT
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr.:	DATE OF DEPARTURE: CRUISE ONLY DISABLED CABIN REQUESTED:	□ CRUISE A	.ND FLIGHT
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr.: MSC Crociere strongly recommends t	DATE OF DEPARTURE:	☐ CRUISE A☐ YES	.ND FLIGHT □ NO verity of their
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr.: MSC Crociere strongly recommends to condition – request accommodation in	DATE OF DEPARTURE:	☐ CRUISE A☐ YES	.ND FLIGHT □ NO verity of their
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr.: MSC Crociere strongly recommends to condition – request accommodation in and inconvenience.	DATE OF DEPARTURE: CRUISE ONLY DISABLED CABIN REQUESTED: that passengers with reduced mobility – regardless on a specially-equipped cabin, because using an ordina	☐ CRUISE A☐ YES	.ND FLIGHT □ NO verity of their use difficulties
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr: MSC Crociere strongly recommends to the condition — request accommodation in and inconvenience. MEDICAL DETAILS MEDICAL CERTIFICATE OF FITNESS (and if applicable on the flight)	DATE OF DEPARTURE: CRUISE ONLY DISABLED CABIN REQUESTED: that passengers with reduced mobility – regardless on a specially-equipped cabin, because using an ordina	☐ CRUISE A☐ YES If the type and seven cabin could cause	ND FLIGHT NO verity of their use difficulties
ADDRESS: CAPACITY: CRUISE DETAILS VESSEL: DESCRIPTION OF PACKAGE: CABIN Nr.: MSC Crociere strongly recommends to condition — request accommodation in and inconvenience. MEDICAL DETAILS MEDICAL CERTIFICATE OF FITNESS (and if applicable on the flight) ILLNESS(ES):	DATE OF DEPARTURE: CRUISE ONLY DISABLED CABIN REQUESTED: that passengers with reduced mobility – regardless on a specially-equipped cabin, because using an ordina	☐ CRUISE A☐ YES If the type and seven could cause	ND FLIGHT NO verity of their use difficulties

on-board medical centre, as indicated by your own physician. MSC Crociere strongly advises you to carry your medicines

and/or medical equipment in your hand luggage.



DIETARY REQUIREMENTS:						
dietary requirements. MSC Splendida, MSC	MSC Crociere underta Fantasia, MSC Magnific Iorthern Europe; all the	ikes to prov ca, MSC Mi	vide meals for coeli usica, MSC Orches	e Reception and/or the Nac passengers exclusively tra and MSC Poesia, on tion of pre-packaged glu	y on board t ly during tra	the vessels avel in the
ALLERGIES:						
PREGNANCY:	□Y	ES	□ NO	WEEK:		
age, progress of the c confirms their fitness t you that the medical t to deal with complica- to the pregnancy (suc	surrent and any previor to undertake the prop facilities and equipmen tions in pregnancy, and	us pregnandosed journed t on board that during swaying mo	cies, any concurren ey, as well as the w may be technically g a cruise circumsta evement of the ves	cal certificate which — to t conditions and any ot week of pregnancy. MSC inadequate for the pur ances may arise which p sel, adverse weather cor ansfers, etc.).	her relevant Crociere als poses of chi resent a po	t factors – so informs ildbirth, or tential risk
GUIDE DOG:	□Y	ES	□NO			
will require the compu- hours preceding the journ notice to the parelevant arrangements be personally responsi (with the help of his/h	ulsory identification doc burney by the veterinal ssenger concerning the s for embarkation and ible for the custody, nu- ter helper or fellow trav	ry surgeon e accommo disembarka trition and a veller if app	ed by the competer certifying the animal dation granted to fation of the vessel. general care of the licable).	the cruise (in particular, nt local health authority, al's physical condition). Ne the animal, any facilities at The passenger, on his/he animal throughout the passenger.	stamped wit 1SC Crocier available for er part, und period spent	thin the 24 re will give it and the ertakes to t on board
	DARD AND/OR AT THE					
	SER REQUIRE ASSISTA				□ YES	□ NO
MSC Crociere informs	s passengers that special	al means of	transport from and	l to the terminal could rend available, MSC Crocie	esult in addit	
WHEELCHAIR DETA	AILS					
DESCRIPTION:						
□ ELECTRIC	☐ FOLDING		□ SCOOTER	□ OTHER S	SIMILAR EQ	UIPMENT
IF ELECTRIC, BATTER	RY USED:					
□ GEL	□ DRY					
MSC Crociere informs	s passengers that wet b	oatteries ma	ay not be brought o	on board its vessels.		
DIMENSIONS WHEN	N OPEN:	cm	x cm	x cm		
DIMENSIONS WHEN	N FOLDED:	cm	x cm	x cm		
WEIGHT: kg						

2 of 4

MSC Crociere S.A. - Chemin Rieu, 12-14 - 1208 Geneva - Switzerland



ASSISTANCE AT THE AIRPORT AND/OR DURING THE FLIGHT

MSC Crociere informs you that each airport and air carrier has its own restrictions, and we therefore ask you to notify us in good time of any special needs, so that we can forward the information to the air carrier in sufficient time for your requirements to be met. In any case, since the air carrier is a third party and not MSC Crociere, it may take a few days to confirm the availability of the service requested. The option of using your own wheelchair to access the stairs/door of the aircraft may be available, depending on the airport of departure.

BOARDING DETAILS:

\square WCHR (The passenger is able to use the stairs and move from the entrance of the aircraft to their assigned seat)	
\square WCHS (The passenger is NOT able to use the stairs, but can move from the entrance of the aircraft to their assigned seat)	
□ WCHC (The passenger is immobile, i.e. he/she is NOT able to use the stairs and is NOT able to move from the entrance of the aircraft to their assigned seat)	
DIFFICULTY IN WALKING LONG DISTANCES (special assistance will be requested from the air carrier and/or the airport for the purpose of travelling between the check-in and boarding gate, or from the gate of disembarkation to the arrivals area):	
REQUIREMENTS RELATING TO THE SEAT DURING THE FLIGHT:	
MEDICAL EQUIPMENT NEEDED DURING THE FLIGHT:	
DIETARY REQUIREMENTS DURING THE FLIGHT:	3 of 4

MSC Crociere also informs you that:

The vessel has limited medical facilities and equipment which may consequently be technically inadequate for the treatment of your condition and potential complications related to it, and the medical staff on board may not have the specific expertise required.

The means of transport used for excursions (provided by third parties and not MSC Crociere and not included in the holiday package) may not be technically suitable for your specific needs;

The Captain has the power in any event – acting on the advice of the on-board Medical Officer – to refuse, at his entire discretion, to allow you to embark, or to require you to disembark at any time and at any port, at your own cost, in the event that your safety is likely to be compromised by the vessel.

In accordance with the relevant legislation, the Data Controller of the personal data, voluntarily supplied by you completing this form, is MSC Crociere S.p.A., with registered office at via Agostino Depretis No. 31, Naples (Italy), against whom the rights prescribed by the above legislation may be exercised. Your personal data will be processed in full compliance with the relevant legislation in force and will not be disclosed to third parties, except in the event that disclosure is necessary to fulfil a contractual obligation, or pursuant to legal requirements or where expressly permitted by law; in any event, your data will not be shared.

MSC Crociere confirms, finally, that completing and signing this form does not of itself render effective the sale contract for the holiday package, which - as set out in the General Terms and Conditions of Sale - remains subject to confirmation by the Company.

The undersigned, on his/her part, declares that:

- the information provided above is complete and truthful and that he/she consents to it being processed in accordance with the above arrangements;
- he/she has read and accepts the General Conditions of sale and transportation as included in the relevant MSC Crociere brochure;
- he/she has informed his/her own physician of all circumstances relating to the holiday package selected, and the physician, having taken account of those circumstances, has issued a certificate confirming fitness to undertake the



cruise trip (and, where applicable, the flights), which the undersigned has attached to this form;

- he/she has been fully informed of all circumstances which are potentially prejudicial to his/her health and safety and that he/she has decided in full knowledge of the facts to purchase the holiday package, accepting the risks relating thereto and hereby releasing MSC Crociere S.A., its agents, its insured, insurers, ship owners, the captain and crew members of the vessel and/or any other party involved in any way (referred to collectively as the "Company"), from all civil and/or criminal liability arising from the occurrence of medical emergencies relating to his/her own medical condition, for which the on-board medical assistance proves to be inadequate, deficient and/or unavailable;
- that he/she also releases the Company from all civil and/or criminal liability relating to medical treatment and care to which he/she submits voluntarily, to the condition and operation of equipment which he/she brings on board and, generally, relating to all matters declared above.

Date	Signed	

4 of 4