



<i>To Be Used By Statue Cruises Staff Only:</i>	
Date Received _____	Account # _____
Order # _____	Invoice Sent _____
Payment Rcvd. _____	Tickets Confirmed _____

1 Audrey Zapp Drive, Jersey City, NJ 07305 · 877-LADY TIX

Statue Cruises Tour & Travel Information Form

Company Name _____

Contact Name _____

Address _____

Phone Number _____

Fax Number _____

Email _____

<u>Type of Company:</u>	
Convention Planner _____	
DMC _____	F.I.T. _____
U.S Domestic Tour Operator _____	
Inbound Tour Operator _____	
Web Based Tour Wholesaler _____	
Student Travel _____	
Other _____	

Reservation Request Procedure:

1. Download and complete both forms.
2. Email forms as an attached file to groups@statuecruises.com
(Upon receipt, Statue Cruises will provide you with a company account number)
3. For future requests, only submit the ticket request form.
4. Reservation requests are not guaranteed unless confirmed by Statue Cruises.
5. A confirmation of your order will be sent via e-mail. If you do not receive a confirmation within 2 business days please call 1-877-523-9849, Group Sales

Ticket types available: *All tickets are valid for one-time use only*

Reserve Time Tickets are only valid for the Date/Time you specify.
 3-Day Flex Tickets are valid for three consecutive days from your requested date.
 60-Day Flex Tickets are valid for sixty consecutive days from your requested date.
 180-Day Flex Tickets are valid for one hundred-eighty days from your requested date.
 You may also purchase the audio tour in addition to the flex and reserve time tickets.

If you would like to reserve a Monument Access Pass for each member of your group, you must request Reserve Time Tickets. Monument Access Passes have limited availability and are not guaranteed.

If bringing a student group, I agree to provide one adult leader (over 21 years of age) for every 10 youths below the age of 21, who must remain with the group. Visitors with the group who are 18-20 years old do not qualify as chaperones.

By submitting this group information and ticket request form, I agree to follow all rules and regulations established by the National Park Service for the operation of the Statue of Liberty National Monument and the Ellis Island Immigration Museum.

Print Name

Date



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Statue Cruises Tour & Travel Ticket Request Form

Company Name _____ Statue account number (if available) _____

Please select one:

___ Reserve Time Ticket Specify Arrival Date _____ 1st choice Time _____
 2nd choice Time _____ 3rd choice Time _____
 *Monument Pass Yes ___ No ___ *Subject to availability

___ 3-Day Flex Ticket }
 ___ 60-Day Flex Ticket } Specify Arrival Start Date _____
 ___ 180-Day Flex Ticket }

Where will your group be departing from?

 Liberty StatePark, NJ _____

 Battery Park, NY _____

Ticket Type	Price	Number of Requests	Total
Adults (13 +)	\$13.00	x	= \$
Seniors (62 +)	\$10.00	x	= \$
Children (4-12)	\$5.00	x	= \$
Audio Tour (additional)	\$6.40	x	= \$
Shipping			= \$
Total			= \$

This section to be completed for Student Groups only. Note: Discounted rates are not available in July or August. If your request is for these months please complete section above.

Ticket Type	Price	Number of Requests	Total
Students (Age 4 – 12)	\$5.00	X	= \$
Students (Age 13-17)	\$5.00	X	= \$
*Chaperones	\$5.00	X	= \$
additional Adult Tickets	\$10.00	X	= \$
additional Senior Tickets	\$10.00	X	= \$
Audio Tour (additional)	\$7.25	X	= \$
Shipping			= \$
Total			= \$

One adult over 21 years old is required for every 10 youth. Only the required number of adult chaperones will be eligible for the discounted rate.

Please send school letterhead to groups@statuecruises.com or fax to 201-432-1801.

Group Name _____
 On-Site Leader _____

Ticket Delivery Method: ___ E-ticket ___ Will Call Pickup ___ Mail

**Shipping charges: \$8 Priority Mail Envelope/\$15 Priority Mail Package/\$40 Express Overnight/\$10 handling with Shipping Account Number provided

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Contact Name _____ Email _____ Date _____

* Take the memories with you! Ask a Group Sales Agent about group photo options during your visit.