

SHAREHOLDER BENEFIT REQUEST FORM

NAME: _____ DATE _____
(Owner of the 100 shares will receive the onboard credit)

SHIP: _____

SAILING DATE: _____ RESERVATION #: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ E-MAIL: _____

Enclosed is the following proof of ownership documentation required to receive shareholder benefit offer:

A photocopy of your shareholder proxy card

or

A current brokerage statement (brokerage account number must be blacked out before submitting) showing proof of ownership of at least 100 shares of Norwegian Cruise Line Holdings Ltd.

I, _____, hereby certify that the above information is accurate.
(Print name)

Signature: _____

Please submit Shareholder Benefit Request Form along with proof of ownership by mail or email to:



Mailing Address:

Norwegian Cruise Line
Shareholder Benefit Department
7665 Corporate Center Drive
Miami, FL 33126

Email:

ShareholderBenefit@ncl.com

To learn more about
Norwegian Cruise Line
visit www.ncl.com



Mailing Address:

Oceania Cruises
Shareholder Benefit Department
7665 Corporate Center Drive
Miami, FL 33126

Email:

ShareholderBenefit@
oceaniacruises.com

To learn more about
Oceania Cruises
visit www.oceaniacruises.com



Mailing Address:

Regent Seven Seas Cruises
Shareholder Benefit Department
1401 NW 136th Avenue, Suite 101
Sunrise, FL 33323

Email:

ShareholderBenefit@RSSC.com

To learn more about
Regent Seven Seas Cruises
visit www.rssc.com