

# Enchanted Ladies Cruises & Tours

## TERMS AND CONDITIONS

**DEPOSITS AND PAYMENTS:** Your reservation deposit of **\$75.00** per Person (**NONREFUNDABLE**) is payable upon submission of this Reservation Request Form OR BY **OCTOBER 1, 2019**. *(Deposit fully refundable if we cancel the trip due to lack of participation)*

**Double Occupancy \$699.00 Triple Occupancy \$679.00 Single Occupancy \$984.00**

After \$75.00 Deposit

8 payments of

**\$78.00**

**\$75.50**

**\$113.63**

**First Payment Starting November 1, 2019 and FINAL PAYMENT on JUNE 1, 2020**

**CANCELLATIONS:** All cancellations requests must be submitted in writing and addressed to Enchanted Ladies Cruises & Tours. **Cancellation Policy WITHOUT INSURANCE, \$75.00 NONREFUNDABLE, cancellations made FEBRUARY 1, 2020 one half of trip cost, Cancellations after MAY 1, 2020 NO REFUND.**

**CANCELLATION INSURANCE:** Available and recommended at \$59.00 per person

### REGISTRATION FORM – PLEASE PRINT

**WASHINGTON DC & National Museum of African American History – AUGUST 6-12, 2020**

Please make reservations for the following person(s) shown below

My \$75.00 per person Deposit has been paid on-line *(Nonrefundable/ Non-transferable - \$35.00 on all NSF Checks)*

My \$75.00 per person Deposit is being mailed *(Nonrefundable/ Non-transferable - \$35.00 on all NSF Checks)*

NAME (Legal)

Gender (please circle)

Date of Birth

1. \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
E-MAIL \_\_\_\_\_

2. Roommate: . \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
E-MAIL \_\_\_\_\_

3. Roommate: . \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
E-MAIL \_\_\_\_\_

CHECK ONE: DOUBLE ROOM \_\_\_\_\_ TRIPLE ROOM \_\_\_\_\_ SINGLE ROOM \_\_\_\_\_

**PLEASE CHECK ONE MY AGENT IS:** \_\_\_\_\_ CAROL \_\_\_\_\_ YOLANDA \_\_\_\_\_ RENEE FELKER

**YOU MUST CHECK ONE:** (1) \_\_\_\_\_ Add Travel Insurance at \$59.00 per person (2) \_\_\_\_\_ I am refusing insurance at this time

I have read, understood and hereby agree to the terms and conditions set forth above. I understand that reservations will be available on a first-come, first-serve basis. I accept the conditions as stated above and submit my reservation(s) as indicated. I understand that the final payment in full is due by **JUNE 1 2020**.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please make checks payable to **Enchanted Ladies Cruises & Tours** and mail with the registration form to:

**Enchanted Ladies Cruises & Tours, 643 Oxford Avenue, Matteson, IL 60443**