

# Enchanted Ladies Cruises & Tours

## TERMS AND CONDITIONS

**DEPOSITS AND PAYMENTS:** Your reservation deposit of \$75.00 per Person (**\$50.00 NONREFUNDABLE**) is payable upon submission of this Reservation Request Form.

### Final Payment due on July 10, 2010

**NOTE:** Request for Triple & Quad is on 1<sup>st</sup> come basis, as space is limited \$250.00 per person Deposit due at time of booking. **Request for Oceanview Stateroom at \$838 Double/ \$696 Triple and \$624 only available by request with full deposit of \$250.00 per person at time of booking.**

**CRUISE FARE:** Rates are per person based on double/Triple/Quad occupancy and include 7 nights cruise fare, port charges, taxes. **Airfare & Transfers from Ft Lauderdale, FL Airport are not included.** Travel Vacation Protection Plan recommended.

**CANCELLATIONS:** All cancellations requests must be submitted in writing and addressed to Enchanted Ladies Cruises & Tours.

**IMMIGRATION:** U.S. and Canadian citizens must carry documentary proof of citizenship; a **passport not required BUT highly recommended.** Boarding will be denied to those without proper documentation.

**NOT INCLUDED:** Shore excursions, and any items of a personal nature such as telephone calls, and beverages not on the menu (sodas, bottled water, etc.).

### 2009 REGISTRATION FORM – PLEASE PRINT

#### Carnival "FREEDOM" 6 Night Western Caribbean Cruise October 3-9, 2010

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

\_\_\_ My deposit check is enclosed \$75.00 per Person or \$250.00 per person Triple/Quad or Oceanview cabins (\$50.00 per Person nonrefundable - \$35.00 on all NSF Checks)

\_\_\_ Please charge the deposit \$75.00 per Person or \$250.00 per person Triple/Quad or Oceanview cabins (\$50.00 Non-refundable)

To: \_\_\_ MasterCard \_\_\_ VISA \_\_\_ Discover \_\_\_ Amer. Express

Number \_\_\_\_\_ ExpirationDate \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

Name (as it appears on card) \_\_\_\_\_

NAME (Legal)

Gender (please circle)

Date of Birth

1. \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Roommate: . \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Roommate: . \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

E-MAIL \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

Cabin Choice please check one: \_\_\_ Interior \_\_\_ Oceanview \_\_\_ Balcony

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 July 10, 2010.

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**

For more information call **Carol (708) 720-4750** or E-mail [icruise3@aol.com](mailto:icruise3@aol.com)