

Enchanted Ladies Cruises & Tours ** TERMS AND CONDITIONS

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

Final Payment due on JUNE 15, 2019.

CRUISE FARE: Rates are per person based on double, (*single, triple and quad occupancy by request*) and include 4 nights cruise fare, port charges, taxes, fees, Gratuities & Travel Protection Insurance.

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; an Original Birth Certificate with raised seal plus photo ID **Passport is 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.).

- REGISTRATION FORM - PLEASE PRINT

"Navigator of the Seas" 4 Night Bahamas Cruise - Sept. 9, 2019

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

My deposit check is enclosed \$50.00 per Person (\$50.00 per Person nonrefundable - \$35.00 on all NSF Checks)

Please charge the deposit \$50.00 per Person (\$50.00 Non-refundable)

To: MasterCard VISA Discover Amer. Express

Number _____ ExpirationDate _____ 3 Digit Code _____

Name (as it appears on card) _____

<u>NAME (Legal)</u>	<u>Gender (please circle)</u>	<u>Date of Birth</u>
1. _____	M F	____/____/____

CROWN & ANCHOR MEMBER # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

MEDICAL CONDITIONS: _____

EMERGENCY CONTACT: _____ PHONE (____) _____

ROOMMATE: _____ M F _____/____/____

CROWN & ANCHOR MEMBER # _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

MEDICAL CONDITIONS: _____

EMERGENCY CONTACT: _____ PHONE (____) _____

Cabin Choice please check one: Interior Ocean View 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 **JUNE 15, 2019.**

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