

Enchanted Ladies Cruises & Tours - TERMS AND CONDITIONS

All above rates are quoted in **US dollars, per person**. ALL INCLUSIVE plan with current taxes and tips and transfers included in the rate. No more than 3 adults per room. **Airfare not included**

Gardenview
\$643 Double Occupancy
\$613 Triple Occupancy
\$1,007 Single Occupancy

Oceanview
\$723 Double Occupancy
\$688 Triple Occupancy
\$1,087 Single Occupancy

DEPOSITS AND PAYMENTS: Your reservation deposit of **\$50.00** per Person (**Non-Refundable**) is payable by **NOVEMBER 18, 2009** upon submission of this Reservation Request Form.

Final Payment due on June 7, 2010

CANCELLATIONS: All cancellations requests must be submitted in writing and addressed to Enchanted Ladies Cruises & Tours. **Without Vacation Protection Plan 45 Days or more cancellation fee is \$50, 44-31 Days \$125, 30-0 Days 100% No Refund.** No refunds are issued after the departure date of the trip. If you cancel your trip, cancellation fees and penalties will be deducted from your refund. Refund processing could take up to six weeks after receipt of cancellation letter. Travel Vacation Protection Plan recommended at \$50 per person.

IMMIGRATION: PASSPORT IS REQUIRED NOT INCLUDED: Air Transportation

REGISTRATION FORM – PLEASE PRINT

RIU PALACE CABO SAN LUCAS August 18-22, 2010

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

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

___ Please charge the deposit \$50.00 per Person (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. _____	<u>M F</u>	_____/_____/_____
Roommate: . _____	<u>M F</u>	_____/_____/_____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

EMERGENCY CONTACT: _____ Phone # _____

Accommodations please check one: ___ Garden view ___ Ocean view

I have read all the information above regarding Cancellation Vacation Insurance at \$50 per person:

Please Check One: Please Add ___ 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 7, 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**

Or Fax Completed Form to (708) 889-1712

For more information call Carol (708) 720-4750 or E-mail lcruise3@aol.com

You may also sign up on-line at www.enchantedladiestravel.com