

Enchanted Ladies Cruises & Tours

TERMS AND CONDITIONS

DEPOSITS AND PAYMENTS: Your reservation deposit of \$75.00 per Person double or \$150.00 per person Triple/Quad (**\$25.00 is nonrefundable**) per person is payable upon submission of the Reservation Request Form.

Final Payment due on May 12, 2012

NOTE: Request for Triple & Quad is on 1st come basis, as space is limited.

CRUISE FARE: Rates are per person based on double occupancy and include 4 nights cruise fare, port charges, taxes **Airfare, Transfers & Travel Vacation Protection Plan is not included in this package.**

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.).

2012 REGISTRATION FORM – PLEASE PRINT

Carnival Cruise Lines "Sensation" July 15-19, 2012

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

My deposit check is enclosed \$75.00 per Person or \$150.00 per person Triple/Quad or Oceanview cabins (\$25.00 per Person nonrefundable - \$35.00 on all NSF Checks)

Please charge the deposit \$75.00 per Person or \$150.00 per person Triple/Quad or Oceanview cabins (\$25.00 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 _____ / _____ / _____

Roommate: . _____ M F _____ / _____ / _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE (____) _____

E-MAIL _____

EMERGENCY CONTACT: _____

MEDICAL CONDITIONS: _____

Cabin Choice please check one: Interior Oceanview

YOU MUST CHECK ONE: Add Travel Insurance at \$65 or \$79 per person 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 May 12, 2012.

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