

# Enchanted Ladies Cruises & Tours - TERMS AND CONDITIONS

**DEPOSITS AND PAYMENTS:** Your reservation deposit of \$250.00 per Person (**\$50.00 is nonrefundable**) is payable upon submission of this Reservation Request Form. **Final Payment due on JULY 10, 2019**

**NOTE:** Request for all Triple & Quad is on 1<sup>st</sup> come basis, as space is limited, and requires full deposit of \$250.00 per person at time of registration.

**CRUISE FARE:** Rates are per person based on double occupancy and include 7 nights cruise fare, port charges, taxes.

**Airfares, Roundtrip Transfers & Insurance are not included. Travel Vacation Protection Plan \$69.00 or \$89.00 highly recommended.**

**CANCELLATIONS:** All cancellations requests must be submitted in writing and addressed to Enchanted Ladies Cruises & Tours. Terms without insurance 75 days prior to full Deposit \$250.00, 29 to 9 days 50% of cruise fare & 10 days or less **NO REFUND.**

**IMMIGRATION:** U.S. and Canadian citizens must carry documentary proof of citizenship; a **PASSPORT is required.** 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

### “BRILLIANCE OF THE SEAS” Mediterranean Cruise October 20-27, 2019

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

♥Our deposit check is enclosed \$125.00 per Person or \$250.00 per person triple & Quad cabins (\$100.00 per Person nonrefundable - \$35.00 on all NSF Checks)

♥Please charge the deposit \$125.00 per Person or \$250.00 per person triple & Quad cabin:

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 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

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

ROOMMATE: \_\_\_\_\_ M F \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

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

EMERGENCY CONTACT/MEDICAL CONDITIONS \_\_\_\_\_

Cabin Choice please check one:  Interior  Ocean view  Balcony

**Must Check One:**  Yes add insurance of \$69 (interior or Ocean View/ OR \$89 (Balcony) per person  
 I am declining insurance

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, 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 **DEBORAH BROOKS 630 606-3580** or E-mail [deborahbrooks11151@gmail.com](mailto:deborahbrooks11151@gmail.com)

Or **YOLANDA WILLIAMS 708 898-7274** or E-mail [yocruise2@aol.com](mailto:yocruise2@aol.com)