

**2009 Poz Cruise Retreat Reservations Form**

**October 10 - 18, 2009 – Eight Nights!!**

**We sail from Ft Lauderdale to San Juan, St Thomas, Antigua, Tortola, and Nassau**

*Passports Are Required!!*

Couples may fill out one form otherwise one form for each guest is required.

Please print clearly and neatly as some handwriting is difficult to read!!!!

**Contact Information:**

Legal Name (as on passport):

Passenger 1: \_\_\_\_\_ Nickname: \_\_\_\_\_ DOB / /

Passenger 2: \_\_\_\_\_ Nickname: \_\_\_\_\_ DOB / /

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone \_\_\_\_\_ Day Phone \_\_\_\_\_

1<sup>st</sup> Person Email \_\_\_\_\_ Carnival Past Guest Number \_\_\_\_\_

2<sup>nd</sup> Person Email \_\_\_\_\_ Carnival Past Guest Number \_\_\_\_\_

**Cabin Information:**

Inside Cabin: [ ] \$535.00 (Deck 1 or 2)

Outside Cabin: [ ] \$655.00 (Deck 1 or 2)

Balcony Cabins: [ ] \$869.00 (Deck 6 or 7) [ ] \$909.00 (Deck 8 or 9)

Mini Suite: [ ] On Request at prevailing rate

These early booking rates are in effect until March 1 when rates will increase!!!!

A deposit of \$300.00 per person is required. Final Payment is due by July 27, 2009. Rates are per person based upon two in a cabin. Please add taxes and fuel surcharge of \$318.30 (subject to change). Single occupancy rates are doubled.

Name of Roommate: \_\_\_\_\_

[ ] One large Bed [ ] Two twin Beds

I prefer a single cabin and will pay the single supplement: [ ] Yes [ ] No

I am requesting to be matched with a room mate: [ ] Yes [ ] No

Please note that you may find your own room mate up until July 15, 2009. After that date you will be assigned a room mate that you will meet on board the ship. Once room mates are assigned no changes are permitted.

**Billing Information:**

[ ] AMEX [ ] Visa [ ] Mastercard [ ] Discover Exp Date \_\_\_\_\_

Card Number \_\_\_\_\_ Card Holder Name \_\_\_\_\_

I authorize Cruise Designs/Universal Travel to charge deposits and final payments to my card.

Signature of Cardholder \_\_\_\_\_

Final payment is due on or before July 25, 2009. This card will be used for final payment unless prior to July 25, 2009.

**Cancellation and Insurance Information:**

A \$50.00 per person administration fee will be applied to any cancellations received by June 25, 2009. A \$100 per person cancel fee applied from June 25 to the day of sailing. In addition the following cancellation policy as imposed by

Carnival Cruise Line will apply:

Within 75 – 57 days of sailing Loss of Deposit

Within 56 – 29 days of sailing 50% of Total Fare

Within 28 days of sailing 100% of Total Fare

Trip cancellation insurance is strongly recommended. Insurance will allow you to recover monies lost from the insurance company. Covered reasons include medical, death, hurricanes/bad weather, jury duty, damage to home, etc. The cost of the insurance depends on the price of your trip and your age. For example trips under \$1000.00 for people up to the age of 59 will cost \$74.00.

[ ] Yes I want insurance [ ] No. I decline insurance

I have read, understand and accept the information regarding cancellations and insurance.

Signature \_\_\_\_\_

Please fax form to:

Paul Stalbaum – Universal Travel/American Express, 1425 C SE 17 Street, Ft Lauderdale, FL 33334

Phone: 800 – 735 – 0401 or 954 – 761 – 1500 (ext 241)

paul@universal-travel.com

FAX: 954 – 463 - 2703

