

Diving Rebels
7 Day Western Caribbean Cruise
Norwegian Gem

Sunday, November 11, - Sunday, November 18

Departs and returns to Port of New Orleans

Passport Required

Please print clearly and neatly! Those living at the same address can complete one form, otherwise, one per person please.

Passenger Information: (Legal Name as on passport)

Passenger 1: _____ Nickname: _____ DOB _____ US Citizen yes no
Name Title First Middle Last

Passenger 2 _____ Nickname: _____ DOB _____ US Citizen yes no
Name Title First Middle Last

Address _____ City _____ State _____ Zip _____

Primary Phone _____ Other Phone _____ Best time to call _____

1st Person email _____ Have you cruised NCL before? No / Yes Guest # _____

2nd Person email _____ Have you cruised NCL before? No/Yes Guest # _____

Preferred method of communication (Including time of day) _____

Please indicate any special Occasion being celebrated during this cruise _____

Special needs for diet or mobility _____

Emergency Contact Name and Phone (someone not on the cruise) _____

Cabin Information

A per person deposit of \$125 per person is required. Final Payment is due August 10, 2018. Rates are per person based on two per cabin. Single & triple occupancy rates are available. Contact Penny for rate quote

Inside Cabin: [] OceanView Cabin [] Balcony [] Mini Suite []

All categories require an additional \$143.79 per person taxes and port charges (All prices are subject to availability & change until booked with deposit.)

Name of Roommate _____ One large bed [] or Two twin beds []

Free at Sea Choices 1. _____ 2. _____

Insurance

Trip cancellation Insurance is recommended. Insurance will allow you to recover from the insurance company, any money lost. Covered reasons include: medical, death, jury duty, damage to home, etc. A special group rate has been offered for this sailing. It includes up to **\$1,000** reimbursement for trip cancellation or interruption, **\$500 Trip Delay** (\$150 per day), **\$500 Lost Baggage**, **\$10,000 Emergency Accident and Sickness Medical Expense**, **\$20,000 Emergency Evacuation**. The cost of the trip insurance is based on trip cost

[] Yes, I want an insurance quote [] No, I decline insurance

Cancellation Information

(Imposed by NCL)

Aug 13, 2018

Aug 27, 2018

Sept 11, 2018

Oct 11, 2018

Loss of 25% of Total Fare

Loss of 50% of Total Fare

Loss of 75% of Total Fare

Loss of 100% of Total Fare

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

Signature _____

Payment

[] Installments (check or MO) [] AMEX [] Visa [] MasterCard [] Discover

Card Holder Name (as on card) _____

Card # _____ Exp _____ SC _____

Card Billing address (if different from above) _____

I authorize A+ Travel to charge deposits and final payment to my card.

Signature _____

Final Payment is due by Aug 10, 2018. This card will automatically be charged for final payment unless notified prior to that date

Please return form to:

Penny Johnson, A+ Travel, 1216 Glenbury Ct., Arlington, TX 76006

Phone 817-975-6106 (Central Time) Evening Home 817-422-9494 email: dtravelinggirl@gmail.com