



Heritage Books Group Cruise
7-Night Bermuda cruise departing September 02, 2018
Aboard *Celebrity Summit*, roundtrip from Cape Liberty, New Jersey

Contact: Julie Atkins, The Cruise Web, Inc. (800) 377-9383 x 269, or Email: JulieA@cruiseweb.com

<u>Stateroom Category (please check the box)</u>	<u>Cruise-only Fare (Guests 1 & 2)*</u>
<input type="checkbox"/> Inside staterooms (Cat. 12)	\$1,099.00 per person
<input type="checkbox"/> Inside staterooms (Cat. 11)	\$1,135.00 per person
<input type="checkbox"/> Ocean view staterooms (Cat. 08)	\$1,365.00 per person
<input type="checkbox"/> Balcony staterooms (Cat. 2B)	\$1,665.00 per person
<input type="checkbox"/> Balcony staterooms (Cat. 2C)	\$1,685.00 per person
<input type="checkbox"/> Single occupancy inside cabin (Cat.12)	\$1,815.00

* Prices are for cruise only based on double occupancy in US dollars, subject to availability and pricing at the time of booking and **include port charges and government taxes**. Please contact Julie for rates, availability, and pricing on suites, third and fourth occupancy cabins and other cabin categories.

<u>Cruise Deposit Due:</u> Upon Booking	<u>Cruise Deposit Amount:</u> \$475.00 per person
<u>Final Payment Due:</u> May 07, 2018	
To reserve your cruise, please complete this form and fax to (240) 487-0154 or email to JulieA@cruiseweb.com	
Please contact me with more details and a quote for travel protection: <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAMES MUST MATCH PASSPORT:	
1 st Passenger Name: _____	Date of Birth: _____ Citizen of: _____
2 nd Passenger Name: _____	Date of Birth: _____ Citizen of: _____
Address for paperwork and invoicing:	
Address: _____	City: _____ State: _____ Zip: _____
Email: _____	Phone: _____

Cardholder Address (if different from above) and Payment Information:

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Credit Card Type: _____ **Card #:** _____ **Exp.:** _____ **CID:** _____

Name as it appears on card: _____ **Email:** _____

- Automatically bill my credit card for my deposit (and travel protection if selected), **but please contact me to arrange final payment**
- Automatically bill my credit card for my deposit (and travel protection if selected) **and use the same card for final payment**

I hereby authorize the Card Processor (The Cruise Web and/or the cruise line and/or insurance carrier and/or other suppliers) to charge my credit card above in consideration for travel and/or related services and/or products arranged through The Cruise Web, Inc. I have made the above reservation(s) with The Cruise Web, Inc., a travel agency. I agree to the terms and conditions listed at <http://cruiseweb.com/CRUISEWEB-TERMS-AND-CONDITIONS.HTM>. Prior to final payment (due date above) I understand that cancelled reservations will be assessed an agency cancellation service fee equal to 15% of the invoice total (not including any insurance premium), plus a non-refundable group deposit penalty of \$225.00 per person, after final payment cancelled reservations will also incur further supplier penalties in addition to the above penalties listed prior to final payment, but in no event should the total fees/penalties exceed the invoice total. The Cruise Web is not responsible for typographical errors or omissions. Heritage books is solely responsible for the genealogy conference and activities onboard this cruise. The Cruise Web assumes no responsibility for the genealogy activities onboard.

Credit Card Holder Signature: _____ **Date:** _____

Please complete and return this form to the address below, or email or fax this form to Julie Atkins at JulieA@cruiseweb.com, Fax: (240) 487-0154.