

Lead: _____

Booking#: _____

Carnival Cruise Lines Paradise – June 20, 2020 – 5 Day – Tampa – Key West - Havana

**INTERIOR Stateroom
from**

\$803.52
TOTAL per person/double
occupancy

**OCEANVIEW
Stateroom from**

\$898.52
TOTAL per person/double
occupancy

**BALCONY Stateroom
from**

\$1,278.52
TOTAL per person/double
occupancy

Vacation Protection

<https://www.carnival.com/about-carnival/vacation-protection.aspx>

from \$95.
per person

Double Occupancy+

Single Occupancy/Suites+
Rate on request

Triple+

Quadruple+
Rate on request

PAYMENT SCHEDULE	Deposit \$150. per person+ 03/15/2019	Final Payment Balance April, 2020
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Passenger One – PLEASE PRINT CLEARLY		Passenger Two – PLEASE PRINT CLEARLY	
Legal Name* PASSPORT REQUIRED		Legal Name* PASSPORT REQUIRED	
Address		Address	
City/State/Zip		City/State/Zip	
Phone(s)		Phone(s)	
Email		Email	
Country of Citizenship	Date of Birth	Country of Citizenship	Date of Birth
Past Guest Number: <input type="checkbox"/> Yes <input type="checkbox"/> No		Past Guest Number: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Special Medical/Dietary		Special Medical/Dietary	
Method of Payment <input type="checkbox"/> Check (Payable to Advantage Cruises & Tours)		Method of Payment <input type="checkbox"/> Check (Payable to Advantage Cruises & Tours)	
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> American Express		<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover <input type="checkbox"/> American Express	
Name as it appears on Credit Card	Expiration Date	Name as it appears on Credit Card	Expiration Date
Card Number	Code	Card Number	Code
Billing Address:		Billing Address:	
<i>I authorize Advantage Cruises & Travel to charge to my credit card per the schedule.</i>		<i>I authorize Advantage Cruises & Travel to charge to my credit card per the schedule.</i>	
Cardholder's Signature	Date	Cardholder's Signature	Date

+ Rates

Once your full deposit is paid your rate is secured. However, fuel surcharges, port charges and government taxes are subject to change.

Itinerary

The Cruise Line reserves the right to change the itinerary at any time.

Travel Documentation

* The name on your reservation **must exactly** match your proof of citizenship. Proof of citizenship is required in the form of a **VALID PASSPORT**. If you are not a US citizen you **MUST** ask your consulate. Boarding will be denied to those without proper documentation and they will receive no refund.

Cancellation

All cancellations must be made in writing and fees may apply.

Vacation Protection Plan

Trip protection is **RECOMMENDED** and will refund otherwise non-refundable cruise vacation payments and medical expenses in the event of an accident or illness.

Please mail completed form to: Kate Daley ♦ 1512 Winding Way West ♦ Clearwater FL 33764 or Fax to: (727) 489-3695
Questions? (727) 415-3093 or Kate@TravelByKate.com