



# LadyStar Travel



## Evans Family Reunion Cruise

October 22, 2009 – October 26, 2009

Freeport, Bahamas and Nassau, Bahamas

Carnival's Cruise Line "Fascination"

## Mail to: LadyStar Travel

3505 Lakeview Dr. #204

Hazel Crest, IL 60429

Fax: (708) 922-1985

**Reservation Terms and Conditions** - Fill out and return with required deposit by deposit due date. **A registration form is required for each passenger.**

**Name:** \_\_\_\_\_

*(As it appears on Passport)*

**Sex:**      Male                      Female                      **DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Proof of Citizenship: Passport Required!**

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell:** (\_\_\_\_) \_\_\_\_\_

**Fax:** (\_\_\_\_) \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Name of person you will be sharing your cabin with:** \_\_\_\_\_

### Emergency Contact Information

**Name:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_

### Stateroom Selection (Check the appropriate choice)

- |                          |                      |  |
|--------------------------|----------------------|--|
| <input type="checkbox"/> | Inside Stateroom     | \$345.00 per person (1 <sup>st</sup> and 2 <sup>nd</sup> ) |
| <input type="checkbox"/> | Inside Stateroom     | \$235.00 per person (3 <sup>rd</sup> and 4 <sup>th</sup> ) |
| <input type="checkbox"/> | Ocean View Stateroom | \$395.00 per person (1 <sup>st</sup> and 2 <sup>nd</sup> ) |
| <input type="checkbox"/> | Ocean View Stateroom | \$255.00 per person (3 <sup>rd</sup> and 4 <sup>th</sup> ) |

### Optional Charges (check all that apply)

☐ Pre-paid Gratuities \$40.00 (\$10 per day)      ☐ Transfer To/From Ship \$40.00

**Cruise Travel Insurance Protection** ☐ \$50.00 (17 and up)    ☐ \$30.00 (under 16)

**Total Cruise Cost:** \$ \_\_\_\_\_

**Deposit:** \$ \_\_\_\_\_

**Balance Due:** \$ \_\_\_\_\_

**\*\*\*Wavier must be signed if insurance is declined**

**Liability and Responsibility:** Making a reservation shall be deemed to consent to the conditions outlined as follows: **LadyStar Travel**, agent and/or tour operator, acts solely as an agent in good faith for the product provider (*cruise line, tours, etc.*), has no responsibility whatsoever in whole or part for any occurrences including but not limited to any delay, cancellation, changes, loss, accidents, personal injury, sickness, medical expenses, or property damage occasioned by fault or negligence of any person, employee or company entrusted with the performance of such service from whatever the cause. The agent, tour operator, cruise lines, or the owners of vessels or accommodations, have no responsibility whatsoever for any expense or inconvenience caused by late arrivals and departures of trains, airplanes, busses, autos or any changes of schedules beyond its control. Cruise Lines reserve the right to change or abandon all or any part of the cruise program whenever advisable. Tickets and vouchers contain further limitations of liability and a statement of such is available upon request. Your acceptance of the tickets and vouchers constitutes an agreement to all of the terms and conditions as stated on them.

**Proof of Citizenship:** All guests are required to carry proof of citizenship at all times! The only acceptable proof of citizenship is a U.S. Pass Port. This documentation is required by U.S. Customs. No Exceptions!!!!

**Payment & Additional Terms:** *1<sup>st</sup> Deposit of \$50 per person reserves your cabin and above prices. Payment Schedule has been provided with final payment due by August 2009 with both names.* Cabins are capacity controlled with first come basis and subject to availability at time of reservation. ***LadyStar Travel will charge a \$30 fee to any and ALL reservations for all returned checks. At such time the guest will be required to provide further payments in the form of Money Order or Certified Check ONLY! No Exceptions! Once payments are posted under individual name, payments made are not transferable to any other individual to avoid cancellation charges!***

**Cancellation & Refunds:**

<u>Days to Departure</u>	<u>Cancellation Charge (per guest)</u>
Up to 61 days	\$100 per person, plus administration fee
60 to 45 days	\$200.00 per person, plus administration fee
44 to 8 days	100% of total Fare

**LadyStar Travel** and the Cruise Lines base cancellation policy on Group rates and restrictions. \* Administration fee of \$50.00 per person will be assessed for all cancellations, after initial deposit is made.

**Additional Provider Exceptions:** LadyStar Travel reserves the right to cancel any guest for non-compliance of schedule payments, non-payment of scheduled deposits or final cruise payment without written notification of cancellation prior to due date. This will result in loss of deposit and fees, as per above listed cancellation schedule. ***A fee of \$50.00 will be assessed for ALL name changes to ALL reservations.***

**Trip Cancellation Insurance:** Cruise Line offers Cruise Vacation Protection Plans, which is optional and can be purchased which gives protection against Trip Cancellation, Trip Interruption, Trip Delay, Baggage Protection, and Medical Expense Coverage. For pricing and to add to your cruise vacation package please be sure to check the appropriate box. A waiver MUST be signed if insurance is not accepted.

**Signature Authorization:** I have read, understand and agree to the terms, liability, responsibility, payment schedules, deposit policy and cancellation policy stated above. No other offers implied or stated are valid unless stated above or attached. This reservation form becomes a contract upon receipt by **LadyStar Travel** and is enforceable by the laws of the State of Illinois. If the undersigned guest fails to meet the outlined deposit/payment schedule, **LadyStar Travel** reserves the right to cancel reservation and assess the cancellation fee as outlined above. I understand that cruise itineraries, ships and schedules are subject to change with or without notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**For Office Use Only**

Date received: \_\_\_\_\_ Amt. received: \$ \_\_\_\_\_

Check/Money Order/Certified Check # : \_\_\_\_\_

Invoice #: \_\_\_\_\_

Date Invoice Sent: \_\_\_\_\_ Balance Due: \$ \_\_\_\_\_