

12-NIGHT ALASKA CRUISE TOUR

MOUNTAIN PANORAMA ADVENTURE

Sunday, May 17 – Friday, May 29, 2020

Starting at \$4,189.00



Radiance of the Seas

ITINERARY:

Sunday, May 17:	Flight to Anchorage, Alaska	
Monday, May 18:	Anchorage & Talkeetna, Alaska	
Tuesday, May 19:	Talkeetna, & Denali, Alaska	
Wednesday, May 20:	Denali, Alaska	
Thursday, May 21:	Denali, Anchorage & Alyeska, Alaska	
Friday, May 22:	Depart from Seward, Alaska	8:00PM
Saturday, May 23:	Hubbard Glacier (Cruising)	
Sunday, May 24:	Juneau, Alaska	9:00AM-9:00PM
Monday, May 25:	Skagway, Alaska	7:00AM-8:30PM
Tuesday, May 26:	Icy Strait Point, Alaska	6:30AM-3:00PM
Wednesday, May 27:	Ketchikan, Alaska	9:00AM-6:00PM
Thursday, May 28:	Inside Passage (Cruising)	
Friday, May 29:	Arrive in Vancouver, British Columbia	7:00AM

STATEROOMS:
Prices per Person
Based on 2 per stateroom

Inside
\$4,189.00

Ocean View
\$4,359.00

Balcony
\$4,959.00



INCLUSIONS:

- Roundtrip motor coach York/Airport
- Tips to drivers and baggage handling
- Roundtrip airfare
- 5-Night Land Tour and hotels
- 7-Night cruise aboard *Radiance of the Seas*
- Port charges and departure taxes
- Shipboard gratuities
- Meals and entertainment aboard the ship

Rates are per person, based on double occupancy. Cabin categories and prices are subject to availability and are on a first come, first serve basis. Other cabin categories may be available by request. Pricing and stateroom availability for 3rd and 4th guests are available upon request. Lower prices may be available. A valid passport is required. Space will expire November 8, 2019.

A \$250 Deposit per person is due at time of Registration.
Final Balance is due by February 7, 2020.



Contact Lori Heathcote with questions: 717-855-2128 or lori@trvltime.com



REGISTRATION FORM

12-Night Alaska Cruisetour

May 17 - 29, 2020

To make your reservation, please complete the information below:

* Required

SECTION 1: TRAVELER INFORMATION

* Name as it appears on your Passport: _____

* Home Address: _____

* City: _____ * State: _____ * Zip Code: _____

* Email Address: _____

* Phone #: _____ Cell #: _____

* Emergency Contact Name (Not traveling with you): _____

* Emergency Contact Phone Number: _____

* Passport Number: _____

* Passport Expiration Date: ___ / ___ / ___

* Gender: _____ * Date of Birth: ___ / ___ / ___

* Name/Nickname for your Name Tag: _____

List any Dietary Restrictions: _____

Crown/Anchor Number: _____

SECTION 2: GUEST INFORMATION (If NO GUEST, skip to Section 3)

* Name as it appears on your Passport: _____

* Home Address: _____

* City: _____ * State: _____ * Zip Code: _____

* Email Address: _____

* Phone #: _____ Cell #: _____

* Emergency Contact Name (Not traveling with you): _____

* Emergency Contact Phone Number: _____

* Passport Number: _____

* Passport Expiration Date: ___ / ___ / ___

* Gender: _____ * Date of Birth: ___ / ___ / ___

* Name/Nickname for your Name Tag: _____

List any Dietary Restrictions: _____

Crown/Anchor Number: _____

SECTION 3: ACCOMMODATIONS, DINING & TRAVEL

* Please select your Stateroom: Inside Ocean View Balcony

* Please indicate your occupancy type. Double Occupancy Single Occupancy

Please check this box if you would like your room with 2 beds.

* Please select your Dining Time: Early (5:30PM) Late (8:00PM) My Time (6:00PM - 9:30PM)

SECTION 4: INSURANCE

We strongly recommend purchasing Travel Insurance to cover your investment in case you need to cancel the trip for medical reasons or if the trip is cancelled due to supplier bankruptcies, etc. Insurance must be purchased no later than 14 days after the first deposit has been made. Plan costs are based on total trip cost and age PER PERSON. Insurance is non-refundable and non-transferable. You receive basic coverage in the event of unforeseen trip-related expenses such as: Trip cancellation, interruption and delay; emergency medical treatment or evacuation; Lost, stolen or damaged baggage or travel documents; and baggage delay.

* I choose: (Check One)

To purchase the recommended travel insurance. Call for prices

To decline travel insurance at this time

SECTION 5: PAYMENT

Trip cost is per person, based on double occupancy.

\$250 Non-Refundable Deposit per person is due at time of registration.

Final Balance is due by February 7, 2020.

Payment Methods: Check or Credit Card. If you prefer to pay your trip by check, do not fill out your credit card information.

Credit Card Holder: _____

Credit Card Number: _____

Expiration Date: ___ / ___ Security Code: _____

Please accept the enclosed check in the amount of \$_____ for my reservation.

Please charge my credit card in the amount of \$_____ for my reservation.

Signature: _____ Date: _____

SECTION 6: CANCELLATION SCHEDULE (Per Person)

Deposit - Non-Refundable

2/8/2020 and after: Full trip nonrefundable

A \$50 per person administrative fee will be charged in addition to any penalty listed above.

Please make checks payable to: Travel Leaders

* Please mail, email or fax your completed Registration Form to:
Travel Leaders
Attention Lori Heathcote
 2474 N. George St
 York PA 17406

Phone: 717-855-2128 • Fax: 717-854-6555
 Email: lori@trvltime.com • Website: www.trvltime.com
 Facebook: Travel Time Travel Agency