



12-NIGHT SOUTHERN CARIBBEAN CRUISE

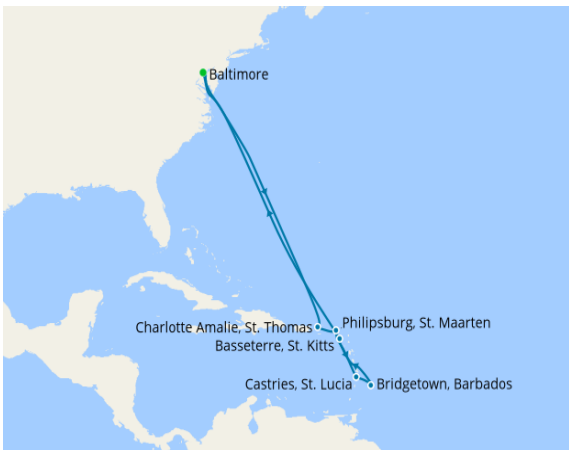
Saturday, February 6, 2021 – Thursday, February 18, 2021

Starting at **\$969.00**

Firefighters, Family and Friends Please Join Shawn and Nan Williams

ITINERARY:

- Saturday, February 6: 4:00PM Departure from Baltimore
- Sunday, February 7: Cruising
- Monday, February 8: Cruising
- Tuesday, February 9: Cruising
- Wednesday, February 10: 8:00AM – 6:00PM Charlotte Amalie, St Thomas
- Thursday, February 11: 7:00AM – 5:00PM Philipsburg, St Maarten
- Friday, February 12: 9:00AM – 6:00PM Castries, St Lucia
- Saturday, February 13: 7:00AM – 5:00PM Bridgetown, Barbados
- Sunday, February 14: 11:00AM – 7:00PM Basseterre, St Kitts & Nevis
- Monday, February 15: Cruising
- Tuesday, February 16: Cruising
- Wednesday, February 17: Cruising
- Thursday, February 18: 7:00AM Arrival into Baltimore



CABIN PRICING PER PERSON*:

Inside Cat 6V
\$969.00

Ocean View Cat 2N
\$1339.00

**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.

Prices are subject to change due to fuel charges and other vendor charges.

INCLUSIONS:

- 12-Night Cruise on *Grandeur of the Seas*
- Meals & Entertainment aboard the ship
- Port Charges and Departure Taxes
- Group Cocktail Party

A valid passport with at least 6 months' validity from scheduled return date is required for each traveler

For more information or to make your reservation, contact:
Kim Lambert at kimtravl@aol.com or 717-332-4825 or
Mindy Eveler at meveler@travellers.com or 717-855-2135





REGISTRATION FORM

12-Night Southern Caribbean Cruise

February 6-18, 2021

To make your reservation, please complete the information below:

* Required

SECTION 1: TRAVELER INFORMATION

* First Name: _____ * Last Name: _____ * Name on your Passport: _____
 * Nickname: _____ * Passport Number: _____
 * Home Address: _____ * Passport Expiration Date: ____ / ____ / ____
 * City: _____ * State: _____ * Zip Code: _____ * Emergency Contact Name: _____
 * Email Address: _____ * Emergency Contact Phone Number: _____
 * Phone Number: _____ Home / Cell
 List Medical/Dietary Concerns: _____
 * Gender: _____ * Date of Birth: ____ / ____ / ____ Crown & Anchor Club # _____

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

* First Name: _____ * Last Name: _____ * Name on your Passport: _____
 * Nickname: _____ * Passport Number: _____
 * Home Address: (If different from above) _____ * Passport Expiration Date: ____ / ____ / ____
 * City: _____ * State: _____ * Zip Code: _____ * Emergency Contact Name: _____
 * Email Address: _____ * Emergency Contact Phone Number: _____
 * Phone Number: _____ Home / Cell
 List any Dietary Restrictions: _____
 * Gender: _____ * Date of Birth: ____ / ____ / ____ Crown & Anchor Club # _____

SECTION 3: ACCOMMODATIONS & DINING

* What cabin category would you like? Inside Ocean View
 * Please indicate your occupancy: Double Occupancy (Bedding Request: King or 2 Twins) Single Occupancy
 * Please select your Dining Time: 5:30PM 8:00PM My Time (anytime between 6:00PM and 9:00PM)

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 To decline travel insurance at this time

SECTION 5: PAYMENT

Trip cost is per person, based on double occupancy.
\$450.00 Deposit per person is due with registration.
Final Balance is due by October 8, 2020.

Payment Methods: Check or Credit Card. If you prefer to pay by check, please make it payable to 'Travel Leaders'.

Enclosed is my check in the amount of \$ _____
 Please charge my credit card \$ _____

Credit Card Holder: _____

Credit Card Number: _____

Expiration Date: ____ / ____ Security Code: _____

* Sign: _____ Date: _____

SECTION 6: CANCELLATION SCHEDULE

If a reservation is cancelled, the following penalties will be incurred **PER PERSON**. **A \$50 per person administrative fee will be charged in addition to any supplier penalty listed below.**

11/8/2020 or prior: No penalty
 11/9/2020 - 11/23/2020 - 25% of total cost
 11/24/2020 - 12/7/2020 - 50% of total cost
 12/8/2020 - 1/6/2021 - 75% of total cost
 1/7/2021 - day of departure - Nonrefundable

* Please mail your completed form to:

Travel Leaders
 Attn: Mindy Eveler
 2474 North George Street
 York, PA 17406

Or

Email form to: kimtravl@aol.com or meveler@travellers.com