## Registration Form for Barefoot Beachcombers Cruise Independence of the Seas 01/17/15

Please circle your cabin category request - Rates are per person double occupancy

Promenade Cabin: \$943.00 G Ocean View Cabin: \$1,223.00 D2 Balcony Cabin: \$1,283.00

D3 Balcony Cabin: \$1,493.00 JS Junior Suite: \$1,789.00

Are you active or retired Military, Law Enforcement, Firefighter or EMT? If so, circle the correct one Name as it appears on your passport: 1<sup>st</sup> Passenger \_\_\_\_\_ Date of birth\_\_\_\_\_ 2<sup>nd</sup> Passenger \_\_\_\_\_\_ Date of birth\_\_\_\_\_ Country of birth passenger 1 \_\_\_\_\_ Country of birth passenger 2 \_\_\_\_\_ Country of residence Address \_\_\_\_\_ City, State, Zip Home phone # \_\_\_\_\_ Cell # \_\_\_\_ Email address Name and phone of emergency contact person \_\_\_\_\_ Passenger #1 Passport # \_\_\_\_\_ Exp date \_\_\_\_\_ Passenger #2 Passport # \_\_\_\_\_ Exp date \_\_\_\_\_ \$500 deposit required for all cabins (\$250 per person) Full credit card #\_\_\_\_\_ Exp date \_\_\_\_\_ If you do not want to list your number you can call me with your credit card number  $\square$  I will call in mv # Name as it appears on credit card \_\_\_\_\_ I authorize Laura Kane Travel to charge \$\_\_\_\_\_\_ to the credit card listed above \_\_\_\_\_ Date \_\_\_\_\_ Please charge this credit card automatically for my final payment on October 24, 2014 ☐ Do not automatically use this credit card, I will call with my final payment or send a check ☐ I/We wish to purchase Travel Guard Insurance at the rate of \$99.00p.p. due October 24<sup>th</sup>, 2014

Ouestions call Katie Kurek: 904-347-7722

Email: katiek724@comcast.net or Laura@LauraKaneTravel.com

If paying by check make check payable to Laura Kane Travel Please send this form to Katie Kurek; Email above or 760 Ocean Palm Way, St Augustine, FL 32080