

TRAVEL REGISTRATION
Lands of the Bible Cruise
September 25 - October 8, 2020
Aboard the Celebrity Reflection

Departure City _____

Passenger Names:

Today's Date: _____

Name: (As it appears on Passport) _____ Sex: ___ Male ___ Female
 Preferred Name (Nametag): _____
 Address: _____ City: _____
 State: _____ Zip Code: _____ Phone: _____ Cell Phone: _____
 Email: _____ Roommate: _____
 Passport Number _____ Birthdate _____ State of Birth _____
 Passport Issue Date _____ Passport Expiration Date _____ Place of Issue (Authority) _____
 Emergency Contact: _____ Relationship: _____ Phone: _____
 Alternate Phone: _____ **Travel Protection:** ___ Accept ___ Decline

Name: (As it appears on Passport) _____ Sex: ___ Male ___ Female
 Preferred Name (Nametag): _____
 Address: _____ City: _____
 State: _____ Zip Code: _____ Phone: _____ Cell Phone: _____
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 Passport Number _____ Birthdate _____ State of Birth _____
 Passport Issue Date _____ Passport Expiration Date _____ Place of Issue (Authority) _____
 Emergency Contact: _____ Relationship: _____ Phone: _____
 Alternate Phone: _____ **Travel Protection:** ___ Accept ___ Decline

Rates Per Person Double Occupancy from New York

10 Interior Stateroom	\$4,898.00
08 Ocean View Stateroom	\$5,498.00
2B Veranda Stateroom	\$5,698.00
1C Veranda Stateroom	\$5,898.00
C3 Concierge Veranda Stateroom	\$5,998.00

Stateroom Selection

____ 1st Choice
 ____ 2nd Choice
 (Required: Only used if 1st choice is unavailable.)

See Brochure for Optional Travel Protection Plan

Optional Rome Pre/Post-Tour Extension \$750.00
 Vatican, St. Peter's Basilica, Sistine Chapel, Colosseum, The Forum and more.

\$100.00 per person Deposit Due with Registration
 Additional \$400.00 per person due January 29, 2020
 Additional \$1,100.00 per person due by March 29, 2020
 Full payment is due By May 28, 2020

NOTE: This Adobe downloadable Registration form can be downloaded and filled out then saved and printed or emailed. Or, if being filled out from a printed copy, just fill out around the zeros.

Passengers for Cruise _____ @ _____ \$ _____
 Rome Pre -Tour _____ @ _____ \$ _____
 Travel Protection _____ @ _____ \$ _____

TOTAL AMOUNT DUE \$ _____

Check # _____

DEPOSIT AMOUNT ENCLOSED \$ _____

By signing below, I/We certify that I have read the "Fine Print" on the brochure, understand its content, and agree to its terms including but not limited to the potential for price increases that may apply before payment in full has been received as set forth in the "Fine Print" and potential price increases after payment in full has been received due to government-imposed taxes and fees.

Signature _____ Signature _____

Mail to: Senior Adult Travel Inc. PO Box 142045, Gainesville FL, 32614

For additional information contact: Jerry Nash 352-727-2268 jerry@senioradulttravel.com

FAITH BASED TOUR HOSTING SERVING THE NORTH FLORIDA AREA

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