**JOIN COMMODORE**

**TIM AMES & LADY JULIE**

**FOR A CRUISE ABOARD THE CARIBBEAN PRINCESS**

**MARCH 23 -31, 2025**

**FOR A 8-NIGHT EASTERN CARIBBEAN CRUISE**

 

**Princess Cruises Line**

**Sunday, March 23 – Monday, March 31, 2025**

**Ship Caribbean Princess**

**8-Night Eastern Caribbean Cruise**

**Roundtrip from Port Canaveral (Orlando), Florida**

**BB-Balcony – $2,350.80 per person** (based on double occupancy)
**B-Mini Suite** **–** **$2,737.28 per person** (based on double occupancy)

**CRUISE FARE – INCLUDES**

* Cruise Fare
* Taxes, Fees, & Port Expenses
* **PRINCESS PLUS**
* Princess® complimentary dining and entertainment, MedallionClass® experience
* Wi-Fi (1 device per guest)
* Crew appreciation
* Plus – Beverage Package (drinks up to $15 each, includes unlimited juice bar)
* Fitness classes (2 per cruise)
* Premium desserts (2 per day),
* Travel Protection - Platinum Coverage Available upon request
* **NEW –**  **2 Casual Dining Meals -** per guestare Pre-Fixe Mealsat Casual Dining Venues.
* **NEW –**  **Unlimited Juice Bar -** available during Breakfast and Lunch during the opening hours of the World Fresh Marketplace
* **Ocean Now APP and Room Service Delivery –** One-Time Free delivery Access, usually a $14.99 fee per each guest

**NOT INCLUDED**

* Roundtrip Airfare
* Transfers ($50.00 per person roundtrip)

**Deposit: $250.00 per person Final Payment Due: November 22, 2024**

**Cruise Itinerary:**

Mar 23 Port Canaveral (Orlando), Florida Mar 28 San Juan, Puerto Rico

Mar 24 At Sea Mar 29 Grand Turk, Turks & Caicos

Mar 25 At Sea Mar 30 At Sea

Mar 26 St. Thomas, Virgin Islands Mar 31 Port Canaveral (Orlando), Florida

Mar 27 St. Maarten,

Any questions, please call Volare Travel, ask for Tracey Roe (586-263-4500) or cell (586-419-7959)

**To secure your reservation**

**Email or Fax Registration/Credit Card Authorization form to** **Tracey@VolareTravel.com** **– fax (586-263-4221)**

**Registration & Credit Card Authorization Form**

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**Date: Yacht Club:**

Have you Sailed on **PRINCESS CRUISES** before? **YES \_\_\_\_\_\_\_\_\_\_\_ NO \_\_\_\_\_\_\_\_ MEMBER # \_\_\_\_\_\_\_\_\_\_\_**

**First, Middle and Last Name** – **MUST be the same as on Passport.**

1st Traveler: First Name Middle Name Last Name

Mailing Address City State Zip

Birthdate Cell Phone/Daytime Phone T-Shirt Size

Email Address

2nd Traveler: First Name Middle Name Last Name

Mailing Address City State Zip

Birthdate Cell Phone/Daytime Phone T-Shirt Size

Email Address

Choice of Cabin Category: Double: Single:

MINI SUITE (MB): \_\_\_\_\_\_\_\_ BALCONY (BB):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Platinum Travel Insurance: Yes: No:

**I hereby authorize Volare Travel Inc. to bill my credit card.**

Name on Credit Card:

Credit Card Number (Last 4 digit’s): Expiration Date: Security Code:

*Call office with complete credit card numbers*

Address of Card:

City: State: Zip:

Signature as it appears on the card (s):

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