

JULY 9TH—JULY 14,2011
RESERVATION FORM
ROYAL CARIBBEAN 5 NIGHT BERMUDA CRUISE

Rates Per Person: Based on Double Occupancy

Category

I	\$889.00	OCEAN VIEW
N	\$719.00	INTERIOR

Last

First

Name: _____

Name: _____

Address: _____

City/State/Zip: _____

Phone (H) _____ (B) _____ Email: _____

Emergency Contact: _____ Phone: _____

Address: _____

Form of Payment: CHECK Credit Card Type: VISA MC AMEX

Card Number: _____ Exp: _____ Sec. Code _____

Name as if appears on Credit Card _____

INSURANCE: \$59.00PP (Highly recommended)

\$100.00 per person deposit is due by October 6, 2010

Final Payment is due April 15, 2011

Please complete form and return with your deposit to:

Centre for Travel

Attn: Group Department/5 Night Bermuda Cruise 2011

114 Hiester Street, State College PA 16801

Email: sherry@cftrav.agencymail.com Web: www.centrefortravel.com

Phone: 814-238-4987 or 800-255-2140 Fax: 814-238-7461

