Ohio Farm Bureau South Region 2016 Member Cruise - Booking Form

7 Day Eastern Alaska – Tuesday May 31 – Tuesday June 7, 2016

Carnival Legend, Departing from Seattle, Washington -- Visits Skagway, Juneau, and Ketchikan, Alaska and cruises past glaciers and wildlife through the Tracy Arm Fjord.

- Rates include all taxes and port fees and are subject to change and availability. Optional travel insurance, gratuities, and transportation not included.
- A deposit of \$400 per person is required to lock-in your rate and specific cabin. Final Payment due March 1, 2016. Payments after your initial deposit can be made in installments if you would like.
- Refund availability differs based on the pricing program you are booked under. We will let you know all refund amounts and dates for your booking.
- All guests must be 21 or sailing with parent or legal guardian (unless married to each other)
- **Optional Travel Insurance is available; cost differs based on room type.** Travel insurance will allow you to cancel up to the sailing date for covered reasons such as sickness and receive a full refund. We will provide you with a quote upon booking.
- This cruise WILL SELL OUT. Book now to avoid disappointment!

Please Fill Out Names as listed on your Passport or Drivers License. If you do not have a passport, please contact us for documentation requirements.

1 st Guest Legal First & Last Name:			Date of Birth:		
2 nd Guest:			Date of Birth:		
3 rd Guest:			Date of Birth:		
4 th Guest:			Date of Birth:		
1 st Guest Address:					
2 nd Guest Address (if different):					
1 st Guest Phone Number:					
2 nd Guest Phone Number (if differen	ent): Farm Bureau ID #				
E-Mail Address (We will email you d	eck plans and your documer	tation):			
Emergency Telephone Number (to b	e contacted if necessary whi	le you are onboa	ard)		
PLEASE CIRCLE YOUR PREFERRED ST If a specific category is sold out, we w				o in a sta	teroom
Inside 4A \$1029	Oceanview Window \$1219		Oceanview Balcony \$1559		
Travel Insurance: YES NO	PREPAY Gratuities?	YES NO	DINING:	EARLY	LATE
CHECK (enclosed) or Credit Card Number:			ExpDate _		
Security Code: (3 Digit code located on the k	ack in the signa	ture area, AMEX is a	4 digits o	n front)
Name on the card:	Signature:				
Amount to be charged:	(Deposit of \$400 per person)				
This form can be completed a or FAX to 513-826-1950. Y					

info@clermontcruise.com to discuss stateroom requests and specific room availability. THANK YOU!