

Exclusive Trip for Meritus Medical Center



CARNIVAL PRIDE
YEAR-ROUND SAILINGS FROM BALTIMORE!



May 3, 2015



Rates From: \$779.04

~Group Pricing~

Inside Stateroom (4D) - \$779.04

Inside Stateroom (4E) - \$784.04

Balcony Stateroom (8B) - \$909.04

Balcony Stateroom (8C) - \$964.04

Outside Stateroom available at prevailing rates

All pricing is per person based on double occupancy.

7 NIGHTS / ITINERARY:

| Day | Port | Arrive | Depart |
|------|------------------------|--------|--------|
| Sun. | Baltimore | | 4:30pm |
| Mon. | Cruising day at sea | | |
| Tue. | Cruising day at sea | | |
| Wed. | Grand Turk | 8:00am | 2:00pm |
| Thu. | Half Moon Cay, Bahamas | 9:00am | 5:00pm |
| Fri. | Freeport, Bahamas | 7:00am | 1:30pm |
| Sat. | Cruising Day at sea | | |
| Sun. | Baltimore | 9:00am | |

*Itinerary subject to change, due to, but not limited to; weather, ship congestion, port authority, etc.

Rates Include:

- Round trip transfers to the Baltimore Pier from Hagerstown.
- 7 night cruise aboard the Carnival Pride from Baltimore.
- All meals and entertainment onboard the ship.

GENERAL CONDITIONS

Deposit: A credit card or debit card deposit of \$25 per person made by April 18, 2014 will hold your category until Nov. 10, 2014 **OR** a deposit of \$250 per person is required to make reservations with an assigned stateroom. Book early and make full deposit for best choice of cabin!

Final Payment: The final payment will be due on or before February 2, 2015.

Cancellation Policy: Once reservations are under deposit and you find it necessary to cancel for any reason, you will receive your deposit back less a \$50 cancellation fee. In addition to Richards World Travel fees, Carnival fees are as follows: cancellations received 75-30 days prior to departure deposit amount is lost; 29-8 days prior 50% of total; 7 days or less no refund will be given.

Rates: All rates are those in effect at time of printing and are subject to change without notice due to, but not limited to; fuel surcharges, tax increase, etc...

General conditions are subject to change.



VALENCIA BUILDING
1201 Potomac Avenue
Hagerstown, MD 21742
(301) 791-1010
1-800-638-3502

ON THE SQUARE
202 S. Queen Street
Martinsburg, WV 25401
(304) 263-0133
1-800-447-1588

**Contact Karen at
301-791-1010 #129**

Carnival.
The Fun Ships.

Today's Date: _____

Reservation Information Form
Carnival Pride / May 3, 2015
MERITUS MEDICAL CENTER

PLEASE PRINT – **NAMES AS SHOWING ON YOUR PASSPORT**

_____/_____
Passenger # 1: First Middle Last - **Passenger # 2:** First Middle Last

Date of Birth: _____ / _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Reservation Information

Category Requested: _____

Dining Request: Main _____ (6:00PM) / Late _____ (8:15PM) / Your Time _____ (5:30PM to 9:30PM)

Note: Dining request confirmed only after receipt of full deposit.

Special Needs Request: _____

Traveling With: _____

Passport Information

Country of Birth: _____ / _____

Passport Numbers: _____ / _____

Passenger # 1

Passenger # 2

Issued Date: _____ / _____

Expiration Date: _____ / _____

Place of Issuance: _____ / _____

(example: US Department of State, Philadelphia, National Passport Center)

Emergency Contact Information

If someone back home needs to be contacted while you're away, who would that be?

Name: _____ / Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Deposit Information

Deposit Enclosed: \$ _____ Visa _____, MC _____, AX _____

Name As Shown On Card: _____

Credit Card Number: _____

Expiration Date: _____ - Security Code: _____

Card Holder Signature: _____

(by signing above you authorize the deposit amount to be charged to your credit card)

On Board Account Information Please be sure to fill in the info below.

_____ I will pay a cash deposit when I board the ship.

_____ I will use the same credit card for my on board account as shown above.

_____ I will use the following credit card for my on board account:

Card Number _____ - Expiration Date _____

Name On Card _____ - Security Code _____