

Gales Creek Camp Foundation Spring Break Cruise 2009

Carnival Cruise Lines – Carnival Spirit

Sailing date: March 20, 2009

RESERVATION REQUEST FORM

I would like to reserve a room on the Gales Creek Camp Foundation Spring Break 8-Day Exotic Mexican Riviera Cruise, departing March 20, 2009, aboard the Carnival Spirit.

1st Passenger Name: _____ (Full given first and last name, as it appears on your passport) Home Address: _____ City, State, Zip: _____ Hm #: _____ Wk #: _____ Cell #: _____	2nd Passenger* Name: _____ (Full given first and last name, as it appears on your passport) Home Address: _____ City, State, Zip: _____ Hm #: _____ Wk #: _____ Cell #: _____
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**Please type or write out on additional sheet if you have 3rd and 4th passengers.*

E-mail: _____	E-mail: _____
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E-mail address required

E-mail address required

Age: _____ Date of Birth: _____	Age: _____ Date of Birth: _____
Are you a US Citizen? YES ___ NO ___	Are you a US Citizen? YES ___ NO ___
If No, what nationality: _____	If No, what nationality: _____

(Valid passport required)

Past Passenger on Carnival? YES NO	Past Passenger on Carnival? YES NO
If yes, member # _____	If yes, member # _____

CABIN PRICING

All pricing includes cabin fare, port charges, government fees and taxes.
 Also includes cruise escorts, seminars, cocktail party, and complimentary gifts.

AIR AND TRANSFERS ARE ADDITIONAL

(BASED ON DOUBLE OCCUPANCY AND AVAILABILITY AT TIME OF BOOKING)

1ST AND 2ND PASSENGER PRICING:

<u>Category</u>	<u>Location</u>	<u>Cabin Size (sq.ft.)</u>	<u>Pricing</u>
Cat. 4A Inside Stateroom	Riviera Deck 1	185 sf	\$ 824.00 per person
Cat. 6A Oceanview Stateroom	Riviera Deck 1	185 sf	\$ 924.00 per person
Cat. 8A Balcony Stateroom	Main Deck 4	225 sf (40sf balcony)	\$1044.00 per person
Cat. 8B Balcony Stateroom	Upper Deck 5	225 sf (40sf balcony)	\$1094.00 per person
Cat. 8C Balcony Stateroom	Upper Deck 5	245 sf (60sf extended balcony)	\$1104.00 per person

3RD AND 4TH PASSENGER PRICING: (These prices subject to change)

Limited supply of cabins that accommodate up to 4 people

<u>Category</u>	<u>Location</u>	<u>Cabin Size (sq.ft.)</u>	<u>Pricing</u>
Cat. 4A Inside Stateroom	Riviera Deck 1	185 sf	\$ 527.00 per person
Cat. 6A Oceanview Stateroom	Riviera Deck 1	185 sf	\$ 557.00 per person
Cat. 8A Balcony Stateroom	Main Deck 4	225 sf (40sf balcony)	\$ 587.00 per person
Cat. 8B Balcony Stateroom	Upper Deck 5	225 sf (40sf balcony)	\$ 587.00 per person
Cat. 8C Balcony Stateroom	Upper Deck 5	245 sf (60sf extended balcony)	\$ 587.00 per person

Additional Charges: PRE-PAID GRATITUDES OF \$10 PER PERSON PER DAY FOR A TOTAL OF \$80 PER PERSON. This will be added to your invoice to be paid at final payment.

- Please reserve a _____, Category _____ for _____ people.
(Type of Cabin, i.e. Balcony, Oceanview...)

I understand that a deposit of \$300 per person is due at time of booking. Remaining balance will be due in full at final payment on December 1, 2008.

AIRFARE: GROUP AIR PRICING TO BE DETERMINED. CRUISE HOLIDAYS WILL E-MAIL YOU INFO WHEN AVAILABLE.

When booking your own air flights, your arrival flight into San Diego (SAN) should be no later than 1:00pm on 3/20/09. Schedule your departure flight on 3/29/09 no earlier than 11:30am.

TRANSFERS: We highly recommend passengers taking a taxi to the pier which is only 5 minutes away from the San Diego airport. If you want cruise line transfers, they are \$16 one way or \$32 roundtrip per person. Air itinerary must be provided to set up the transfers.

CRUISE LINE

PRE/POST HOTEL

PACKAGES: If you are interested in hotels, please inquire with Cruise Holidays.
Rates will be available at a later date. (SUBJECT TO AVAILABILITY)

Method of Payment: Credit Card

Passenger #1 Credit Card #: _____
Exp. Date: _____ Amount \$ _____ Cardholder's Name: _____

Passenger #2 Credit Card #: _____
Exp. Date: _____ Amount \$ _____ Cardholder's Name: _____

Passenger #3 Credit Card #: _____
Exp. Date: _____ Amount \$ _____ Cardholder's Name: _____

Passenger #4 Credit Card #: _____
Exp. Date: _____ Amount \$ _____ Cardholder's Name: _____

Dining Preference for Dinner:

Please choose one: ___ 5:45pm Main Dining
 ___ 8:00pm Late Dining

**All dining times are subject to availability and cannot be confirmed until reservation is booked.*

TERMS AND CONDITIONS

I further understand and agree that:

- A Passport will be the required form of documentation identification.
- **A Cancellation Fee of \$100 per person will be charged to my credit card shown above when cancelling before December 1, 2008. ALL CANCELLATIONS MUST BE MADE IN WRITING. Carnival Cruise Lines cancellation policy and terms and conditions apply to all aspects of the booking. Please refer to brochure for detailed information.**
- Cruise Holidays of Portland and Gales Creek Camp Foundation act solely as agents and intermediaries, and shall not be responsible for any breach of contract, or any loss, damage, delay or injury in relation to the Gales Creek Camp Foundation Spring Break cruise.
- Travel Protection Insurance is highly recommended. If you have a pre-existing condition, you must purchase travel insurance within 14 days of the initial deposit to be covered.

Insurance will be added to your invoice for your convenience. Insurance is optional and can be declined verbally or in writing, at which time it will be removed from your final payment invoice.

_____ Date	_____ Signature	_____ Date	_____ Signature
_____ Date	_____ Signature	_____ Date	_____ Signature
_____ Date	_____ Signature	_____ Date	_____ Signature
_____ Date	_____ Signature	_____ Date	_____ Signature

Please mail this form with payment information or fax form to:

CRUISE HOLIDAYS OF PORTLAND

Attn: Karen
13611 NW Cornell Road
Portland, OR 97229
(503) 641-5225
(503) 641-9464 (Fax)
E-mail: karen@cruzholidays.com
www.cruzholidays.com