

BulaDesi Cruise Booking Form

Los Angeles, California to Mexican Riviera

December 4, 2011 to December 11, 2011

Please Place Checkmark Next To Your Choices

Accommodations	CAT	Deck	1st & 2nd person	3rd & 4th person	Taxes (per person)	Total For 1	Total For 2	Total For 3	Total For 4
Interior Standard	4C	Riviera/ Main	\$375.00 each	\$175.00 each	\$220.00	<input type="checkbox"/> \$595.00	<input type="checkbox"/> \$1190.00	<input type="checkbox"/> \$1585.00	<input type="checkbox"/> \$1980.00
	4F	Main/ Upper	\$380.00 each	\$185.00 each	\$220.00	<input type="checkbox"/> \$600.00	<input type="checkbox"/> \$1200.00	<input type="checkbox"/> \$1605.00	<input type="checkbox"/> \$2010.00
	4D	Upper/ Empress	\$375.00 each	\$175.00 each	\$220.00	<input type="checkbox"/> \$595.00	<input type="checkbox"/> \$1190.00	<input type="checkbox"/> \$1585.00	<input type="checkbox"/> \$1980.00
	4E	Riviera/ Main	\$375.00 each	\$175.00 each	\$220.00	<input type="checkbox"/> \$595.00	<input type="checkbox"/> \$1200.00	<input type="checkbox"/> \$1585.00	<input type="checkbox"/> \$2010.00
	6C	Main/ Upper	\$385.00 each	\$185.00 each	\$220.00	<input type="checkbox"/> \$595.00	<input type="checkbox"/> \$1210.00	<input type="checkbox"/> \$1605.00	<input type="checkbox"/> \$2010.00

Travel Insurance Carnival Travel Protection : Cat 4A - 6D \$49.00 per person Kids 16 & Under \$29.00 per person None

*****All Deposits paid are non-refundable unless travel insurance is purchased at the time of booking*****

Passenger Information

Passport Last Name	Passport First Name	Date of Birth	Age	Country of Citizenship or US Perm. Res.	Travel Insurance Amount

First 2 guests receive CABIN with 2 Twin Beds of Converted King. Guests 3/4/5 sleep in Bunk Beds or Rollaways. 3/4/5 beds are not recommended for kids over the age of 16 or tall kids (especially elderly). 3/4/5 beds are ONLY recommended for small kids.

*****Passport is Now REQUIRED for All Travelers*****

Card Holder Information

Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Email (Required for Confirmation): _____

Total Cruise Charges (Please enter amount from above) \$ _____

Total Travel Protection Plan (Please enter amount for all passengers)(Optional) \$ _____

4% Fee of total for Credit / Debit Card \$ _____

Less Deposit (\$250.00 per person deposit by cashier's check only) \$ _____

Total Charges (Deposit Due By 10/10/2011) \$ _____

*****Please Make Checks Payable to: Prime Travel USA*****

Credit Card Authorization

Name as it appears on Card: _____ Type of Card: _____

Card Number: _____ Exp Date: _____ Cvc# (Three digits on back of card): _____

I hereby authorize Prime Travel USA to charge my credit card for the total above for the listed passengers (or any authorized changed names) to sail on the Carnival on December 4, 2011 to December 11, 2011.

Signature: _____ Date: _____

*****Please Fax a copy of your drivers license with this form to (510) 780-9199*****

Cancellation Policy (Please sign your acceptance)

You may make a Name Change in writing and pay a Name Change Fee of \$50 per person. (To replace a guest or to correct a misspelled name)

I understand the Cancellation Policy, and purchasing Carnival's Travel Protection Plan. If I need to cancel under covered reasons, I must inform Prime Travel USA and then claim with Carnival Cruises. I understand that I will receive no refunds from Prime Travel USA for any reasons, even due to missed flights, death or illness in the family, sickness, or accidents.

Please Print Your Full Name _____ Signature _____ Date _____

***For more information about the Cancellation Policy, please visit our website at www.Carnival.com

or www.BulaDesiCruise.com and contact one of our Cruise Directors.***