

Royal Caribbean Group Registration Form – **PRINT**

Group Name: **Primitive Gathering** Cruise Ship: Oasis of the Seas
Nights/Ship: 7 nights Sail Date: February 6, 2016

NOTE: ONE REGISTRATION FORM PER PERSON

Cabin Category (Double Occupancy Rates) per person

___ Jr. Suite w/balcony Oceanview \$2024 + Insurance \$89
___ Balcony Oceanview \$1594 + Insurance \$59
___ Balcony Central Park \$1464 + Insurance \$59
___ Interior Oceanview Window \$1444 + Insurance \$59
___ Interior \$1334 + Insurance \$59

Cancellation Penalties per person	
Days Prior to Sailing	
74 – 57 Days	Deposit Amount
56 – 29 Days	50% of Total Fare
28 – 15 Days	75% of Total Fare
14 Days or Less	No Refund
Name Change Fee - \$50	

Crown & Anchor Society # _____

Dining Request: Early Seating - 6:00 pm _____ Late Seating - 8:00 pm _____ Dynamic(anytime) Dining _____
Student Y N If NO – subtract \$200 from cruise total First cruise? Y N

Legal Name _____ Nick Name _____ Phone () _____

Email _____ My Roommate's Name is: _____

Mailing Address (No PO Boxes) _____ City _____ State _____ Zip _____

Travel insurance is not included in your price package. It is available for your protection from Royal Caribbean (Cruise Care Program) and **STRONGLY RECOMMENDED**. \$59 - \$89 (see above) per person. Each person must purchase it separately. In the event insurance is used, please be aware that it covers the cost of the cruise only.

DATE _____ Purchase Travel Insurance (circle one) YES or DECLINE _____

(Signature required for either option)

If Travel insurance is purchased, it will be charged to credit card on file. You have the option to purchase Cruise Care insurance up to 56 days prior to sale date.

This signature is confirming you are aware of the cancellation penalties as listed in the upper right corner of this page.

Special Diet Required _____

Emergency Contact: _____ Relationship: _____ Phone: () _____

Medical Issues: _____ Allergies: _____

Do you need handicap stateroom? Y N Type _____ Royal Caribbean will be contacted for you.

<p>PAYMENT INFORMATION: <u>Credit and Debit Cards only</u> (Payments are forwarded to Royal Caribbean upon receipt)</p> <p>I hereby give my permission to charge my (circle): Debit Visa MC American Express</p> <p>Card # _____ Exp. Date _____ Security # _____</p> <p>Cardholder Name _____ Signature _____</p> <p>Initial Deposit Payment of \$250.00 (double occupancy per stateroom – paid with registration form) per person by check, money order (payable to Olde Green Cupboard) or credit card. Mail to: Gloria Parsons, 4861 Blackwood Forest Dr. Jacksonville, FL 32257. I hereby agree to pay any outstanding balance in a lump sum or by making periodic payments prior to November 23, 2015. Single occupancy Deposit is \$500. Single occupancy cabin fee is 200%.</p> <p>Attendee agrees to hold harmless any/all employees of Primitive Gatherings, Buttermilk Basin, and Olde Green Cupboard for any loss, damages, or injuries that may occur while traveling to and from or during this event.</p> <p style="text-align: center;">FINAL PAYMENT DUE BY NOVEMBER 23, 2015</p>
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<p style="text-align: center;">PASSENGERS MUST HAVE PROPER TRAVEL DOCUMENTS - U.S. CITIZENS MUST HAVE A VALID PASSPORT</p> <p style="text-align: center;">If you currently do NOT have a passport, apply NOW at your local Post Office. Appointments required.</p> <p style="text-align: center;">NON-U.S. CITIZENS and RESIDENT ALIENS - contact their respective embassies and U.S. Immigration for applicable regulations</p>
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