



VARIETY TRAVEL MANAGEMENT SERVICES, INC.

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GSBA Conference Contact: Kerstin Koenig kerstin@variety-travel.com

Cruise Registration

Complete the information below and return to kerstin@variety-travel.com

1. Full name as it appears on travel documents: _____

a. Date of Birth: _____

b. Email Contact: _____

c. Telephone Contact: _____

2. Full name as it appears on travel documents: _____

a. Date of Birth: _____

b. Email Contact: _____

c. Telephone Contact: _____

Cabin Category:	Cost	No. People	Total Cabin Costs
<input type="checkbox"/> Interior	\$490	_____	\$ _____
<input type="checkbox"/> Ocean View	\$550	_____	\$ _____
<input type="checkbox"/> Balcony	\$785	_____	\$ _____
<input type="checkbox"/> Junior Suites, single, triple and quad cabins: <small>(Costs are per person / double occupancy / includes taxes, fees, gratuities)</small>	Contact me with pricing:		
<input type="checkbox"/> Insurance	\$88	_____	\$ _____

Credit Card: Master Card Visa Discover Card American Express

Card Number: _____ Exp: _____ CID : _____

Billing Address: _____

An initial deposit charge of \$150 per person will be made at the time of reservation, with the final charge for the balance to be made by 11/15/16.