

**USS Cabildo Registration Form/Cruise Date Sept. 25-30, 2009
Radiance of the Seas sailing from San Diego**

Passenger 1 _____ Passenger 2 _____
Passport # _____ Passport # _____
Date of Birth _____ Date of Birth _____
Address _____
City _____ State _____ Zip Code _____
Home # _____ Cell # _____
Work # _____ E-Mail (important) _____
3rd person in cabin _____ 4th person in cabin _____
Passport # _____ DOB _____ Passport # _____ DOB _____

Legal Names are required on all Documentation as the appear on your Passport or Passport Card

*****Please check your cabin preference*****

Balcony cabins located on decks 7 & 8\$779.00 per person _____
Oceanview cabins located on decks 3 & 4.....\$679.00 per person _____
Interior cabins located on decks 2,3 & 4.....\$579.00 per person _____
For single or 3rd/4th person rates call Diana @ 800-346-9543, 405-943-4481 or diana@springalltravel.com

DEADLINE TO BOOK ABOVE RATES IS JUNE 19, 2009 (Space is limited in each category)

***Cost per person includes all applicable taxes, gov't fees, port fees, onboard meals and entertainment.
Prices are cruise only, per person, based on double occupancy. Gratuities extra. A fuel surcharge may apply.**

**Travel Care Insurance is highly recommended. Cost per person is \$59.00
YES @ deposit _____ @final payment _____ Decline Insurance (please initial) _____**

***If you have any pre-existing medical conditions, you are advised to purchase you Travel Care Insurance at the time of deposit. Insurance is non-refundable after purchase. Contact Diana with any questions.**

Will you need air arrangements? Yes _____ No _____ If yes, your departure city _____
Will you require a hotel room pre or post cruise in San Diego? Pre: Yes _____ No _____ Post: Yes _____ No _____
Are you interested in joining a group shore excursion at Cabo San Lucas? Yes _____ No _____

A deposit of \$100.00 per person is due at time of booking to secure your cabin choice. Final payment is due on July 15th, 2009. Your deposit is fully refundable up until time of final payment.

If paying by check, make checks payable to: Springall Travel, 3604 NW 58th St, Oklahoma City, OK 73112

Credit card payments: Amex _____ Visa _____ MC _____ Discover _____
Account # _____ Exp. _____ Security Digits _____
Name as it appears on the card _____
Automatically charge final payment to this card when due? Yes _____ No _____

I authorize Springall Travel to charge my credit card in the amount of \$ _____

Signature _____ Date _____

Please sign and return by mail to Springall Travel or fax to 405-949-9419.

Valid Passports or Passport Cards are required.