



Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Feb 23rd, 2009 on Celebrity Navigator of the Seas out of Fort Lauderdale

Please Complete and Fax to 408-264-6427

Please Note:

Reservation by Fax requires a Credit Card Payment.

Reservation is not complete until Confirmation call or email is received from Primo Cruises.

Primo Cruises will try our best to accommodate your requested cabin type, but cabin assignment is based on availability. Space is limited. Submission of this form is not a guarantee of Reservation.

Passenger Name(s) _____

Please use full legal name as shown on Passport. This cruise vacation requires US citizens to travel with a US Passport.
 (detailed passport requirements can be seen at www.travel.state.gov)

Address: _____

City: _____ State: _____ Zip _____

Contact Information Telephone _____ Cell Phone _____

E-Mail _____ Fax _____ Other Contact _____

Citizenship _____ Passport # _____ exp Date _____

Issued at _____ Notes _____

(Passport# Can be Provided up to 120 days prior to Sail Date)



Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Special Occasions

Are you Celebrating a Special Occasion (Birthday, Anniversary, etc?) during the cruise?

Special Occasion _____ Date _____

Royal Caribbean will help you celebrate your occasion by presenting you with a slice of cake with a special card and a candle on top during your dinner seating. If you would like to purchase a 6" round cake that serves 2-10 people, you must preorder and the cost is \$7.95.

Do you want to Order \$7.95 Cake? _____ Choc/Choc ____ or Vanilla/Vanilla _____

Onboard Beverage Program: Unlimited Fountain Soda and Juice.

If you would like to participate in this program, it must be preordered.

The cost is: \$6 USD per person, per day for Adult Cruisers 18 years of age and older

\$4 USD per person, per day for Young Cruisers 17 years of age and younger

Adult Cruisers Program	\$6.00	x 5 days =	30.00 per person	x	_____ # of people	=	\$ _____	
Young Cruisers Program	\$4.00	x 5 days =	20.00 per person	x	_____ # of people	=	\$ _____	
Total Due for Beverage Programs								

Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Special Needs

Do you have any special needs, such as limited mobility, wheelchair, medical needs or dietary restrictions?

Crown and Anchor Society

Do you have a Crown and Anchor Society Number? _____
If you have a number we will pass it on to the cruise line, and they will contact you directly about your benefits.

Dining Arrangements

Your dining arrangements are scheduled for the **second seating**. Sparkle Josh and the members of this group will have several tables located near each other. We will try to accommodate requests but the cruise line does not guarantee table assignments and does not assign dining seating until sailing day.

I/ we would like to be at the same table with:

(names of other cruisers in this group)

Airport Transfers

Need Transfer Y N (Cruise Line Provided Transportation between Airport and Ship)

Which Airport? _____

RT _____ Departure (to Ship) _____ Arrival (from ship) _____

Price _____

Round Trip To/From Ft. Lauderdale Airport is \$27.60 Per Person

Round Trip To/From Miami Airport is \$56.00 Per Person

To Mix Ft. Lauderdale and Miami Airports (Depart from one and Arrive at the Other) is \$41.80 Per Person

For One Way Only Transfers please call or email Primo Cruises for Pricing

1-877-774-6641 or info@primocruises.com

Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Determine Cost of Your Cruise Vacation

You can see complete details of each stateroom class at:

http://www.primocruises.com/a_sparkle_staterooms.html

All Cruises are Priced Per Person, Double Stateroom Occupancy

Included: Shipboard accommodations, ocean transportation, most meals, some beverages and most onboard entertainment.

Not Included: Air transportation**, transfers**, items of a personal nature, such as shore & land excursions**, specialty restaurant fees, some beverages, photographs, gratuities/service fees, medical services, etc. ** You can add these during or after the reservation process. See Above.

Code for Class of Stateroom	Type of Cabin	Cruise Price Per Person	Fuel Supplement	Taxes and Government Fees	Cruise Total Due Per Person
N	Inside	599	50	87.21	736.21
PR	Promenade	669	50	87.21	806.21
I	Ocean View	719	50	87.21	856.21
H	Ocean View	739	50	87.21	876.21
D3	Balcony	809	50	87.21	946.21
D2	Balcony	819	50	87.21	956.21
D1	Balcony	839	50	87.21	976.21
JS	Junior Suite	1089	50	87.21	1226.21
GS	Grand Suite	1439	50	87.21	1576.21

Stateroom Request

Requested Cabin Category _____

Bed Configuration: Twin Beds _____ or Queen _____

Cruising with Others Name _____ Cabin # _____

Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Summary of Charges

Total Cruise Price
(includes \$137.21 Fuel and
Taxes) Per Person _____ per person x _____ people = _____

Airport Transfers _____ per person x _____ people = _____

Misc Fees (Cake, Drink Passes) _____ = _____

Total Due

Less
Deposit to Reserve Cabin 200.00 _____ per person x _____ = _____

Due By November 30th, 2008 Remaining Balance Due

If you have any questions, please feel free to call or email Therese at Primo Cruises
1-877-774-6641 or therese@primocruises.com

Primo Cruises appreciates your business.

Have a Dazzling Time the Caribbean with Sparkle Josh!

Therese Carlini Moss



Sparkle and Shine on the Seas
Cruise the Caribbean with Sparkle Josh
Fax Reservation Form

Payment for Your Cruise Vacation

Full Deposit is Required to Reserve Cabin **** Final Payment Due by Nov 30th, 2008 *****

Credit Card # _____ Exp Date _____

Name on Card _____ Security Code _____

I authorize Primo Cruises to Charge this Credit Card

\$ _____ Full Amount for this Cruise Vacation at time of Booking Reservation

OR

\$ _____ at time of Booking Reservation (Minimum \$200 per Person Required) and

\$ _____ on Nov 30th, 2008

Signature: _____ Date: _____

Primo Cruises will email you confirmation of this Reservation and Amount Charged to Credit Card.

email address _____

Cruise Line Cancellation Policy

Days Prior to Sailing	Cancellation Fees Schedule	Date
59 to 30	\$100.00 per guest	Dec 26, 2008 through Jan 14, 2009
29 to 8	50% of total invoice per guest	Jan 25 through Feb 15, 2009
7 to 0	No Refund	Feb 16 through Feb 23 rd , 2009

Primo Cruises strongly recommends travel insurance to protect against prepayment loss.

Please Fax Entire Completed Form to 408-264-6427

(incomplete or unsigned forms cannot be processed)