# 2020 OES SERVICE DOGS CRUISE

# GET READY FOR A DOG GONE GOOD TIME!!



LEAVING PAW PRINTS ON THE HEARTS OF OTHERS

**MARCH 7 – 14, 2020** 







## **FAYETTE TRAVEL CENTRE**

142 East Court Street

Washington Court House, OH 43160

(740) 335-6555

(800) 451-7903

fayettetravel@fayettetravel.com http://www.fayettetravel.com

**ORTA 8724001** 



#### **INCLUDED IN YOUR COST:**

Accommodations for 7 nights on your Western Caribbean voyage in the stateroom category of your choice

# ENJOY SERVICE DOG PRESENTATION

Meals onboard the Breakaway\*

Internet Package Included

Taxes & Port Fees

NOT INCLUDED: Airfare, gratuities, insurance

OPTIONAL PACKAGE
(\$130.06 per person):
One-night pre-cruise hotel stay
March 6th at the Courtyard Marriott
Port Canaveral, FL
Includes: Airport to hotel shuttle; Hotel
to cruise port shuttle; Breakfast from
6:30am-7:30am; Cruise port to airport
transfer on March 14th, all taxes

\*Specialty ship dining not included

### **NORWEGIAN CRUISE LINE**

SHIP: NORWEGIAN BREAKAWAY

Embark: Orlando & Beaches (Port Canaveral)

Ports of call at Great Stirrup Cay (Bahamas); Ocho Rios (Jamaica): George Town (Grand Cayman); Cozumel (Mexico)

Disembark: Orlando & Beaches (Port Canaveral)

A PORTION OF THE PROCEEDS WILL BENEFIT GGC SERVICE DOGS FUND



# ALL PRICES ARE PER PERSON BASED ON DOUBLE OCCUPANCY

INSIDE STATEROOM: \$1,036.88 OCEAN VIEW STATEROOM: \$1,216.88 BALCONY STATEROOM: \$1,546.88

TRIPLES AND QUADS ARE AVAILABLE, CALL FOR SPECIAL PRICING

\$250 DEPOSIT DUE AT TIME OF BOOKING

FINAL PAYMENT DUE BY NOV 1, 2019

DEPOSIT EARLY TO SECURE STATEROOM SELECTION



# **GGC SERVICE DOGS 2020 CRUISE** RESERVATION AND PAYMENT FORM

\$250 per person due immediately to confirm a cabin. Limited availability, first come first serve for posted rates

Please return this form: one per traveler, along with payment

The use of passports is highly recommended. Please provide full legal name as listed on state issued, or government identification. NAMES MUST MATCH as BOARDING CAN BE DENIED IF THEY DIFFER.

Last Name:					
First and Middle Names:					
Date of birth: Month	date	year			
Passport #:	expiration date				
NCL #					
Address:					
City/State/Zip:					
Phone: ()		Cell:(	)		
Email:					
Emergency Contact:					
Relationship:		_ Phone:			
Medical/Dietary needs:					
Sharing with:					
Special requests:					



Deposit includes \$50.00 non-refundable reservation fee

agree to pay my credit co	·				
STATEROOM PREFERENCE: INSIDE	OCEANVIEW	BALCONY			
Credit card number:					
Expiration Date:	3 or 4 digit security code:				
Cardholder signature:					
Deposit:	Number of passengers:				
Cancellation insu	rance is optional but availd	ble based on statero	om preference.		
Insurance accepted:	Insurance decline	d:			
Insurance payment included:	Total payment incl	uded:			
All amount and a second	ada thaasaah tha Fassatta Ta	mad Cantus matters as	an amount for NCI		

All arrangements made through the Fayette Travel Centre, acting as an agent for NCL.

Fayette Travel Centre 142 E. Court Street Washington Court House, Ohio 43160 (740) 335-6555 or (800) 451-7903)

**HELPING TRAVELERS "PACK UP" SINCE 1986!** 

