

2013 Multicultural Symposium Series

Cruise Reservation Form

Saturday April 13 Through April 20, 2013

*Come Sail With Carole
In 2013!!!*



MULTICULTURAL
Symposium Series
www.mssconnect.com

1 ♦ Balcony - \$1625 Per Person
YOU GET:
-Breakfast, Lunch & Dinner Aboard The Ship
Luxury Cabin w/ Balcony
Caribbean Presentations by Dr. Ada McKenzie
Entertainment Aboard The Ship
Based on Double Occupancy
Meals in Puerto Rico, St. Marteen & St. Kitts NOT included
\$250 Deposit • \$138 Monthly Payments for 10 Months

2 ♦ Inside Cabin - \$1395 Per Person
YOU GET:
-Breakfast, Lunch & Dinner Aboard The Ship
Deluxe Inside Cabin
Caribbean Presentations by Dr. Ada McKenzie
Entertainment Aboard The Ship
Based on Double Occupancy
Meals in Puerto Rico, St. Marteen & St. Kitts NOT included
\$250 Deposit • \$115 Monthly Payments for 10 Months

- One Year Multicultural Symposium Series Membership With Your Reservation
- **Required: Valid Passport**
- **Recommended: Travel Insurance/Int'l Health Ins. and a Hotel Room if you plan on staying in Miami**
- **You are responsible for Airfare or other transportation to and from Miami.**

Please Assign Me To A: ☐ Balcony ☐ Inside Cabin
Single and Triple accommodations are an additional cost and subject to availability.

Individual Reservation Form:

Mail To: Mr. Gabe Garavanian • Garavanian Travel • 40 Vinal Square • North Chelmsford, MA 01863 • (978) 251-2868
Questions? Call Carole Copeland Thomas at (508) 947-5755 • Carole@mssconnect.com

Full Name (As it appears on your passport) _____

☐ Male ☐ Female Preferred Name On Badge: _____

Agency Request (Your preference to be near/next to this guest) _____

Citizenship: _____ Roommate If Different From Above: _____

Address _____ Ste/Apt _____

City _____ State _____ Zip _____ Country other than USA _____

Home Phone () _____ Cell Phone () _____

Email Address (Important) _____ Date Of Birth (mm/dd/yyyy) _____

Your 12 Month Membership Begins In The Month That Your Payment Is Processed. Today's Date: _____

_____ \$250 Deposit = \$ _____ or...

_____ Full Payment \$ _____ **TOTAL PAYMENT TODAY \$ _____**

Make Your Check Payable To GARAVANIAN TRAVEL

_____ Check _____ Mastercard _____ Visa _____ American Express _____ Discover _____

Card # _____ Expiration Date _____

Name on Card _____

Signature _____