

PARADISE VACATION AND TRAVEL CO., INC.  
5725 MISTY HILL COVE  
AUSTIN, TEXAS 78759  
(512) 418-0290  
www. pvt4u.com

**THANKSGIVING MIRACLE CRUISE IV APPLICATION**

**PLEASE MAIL YOUR APPLICATION AND PAYMENTS TO: PARADISE VACATION AND TRAVEL CO., INC.**  
5725 MISTY HILL COVE, AUSTIN, TEXAS 78759 PHONE (512) 418-0290 - FAX (512) 418-0573  
E-MAIL: [PARADISE@AUSTIN.RR.COM](mailto:PARADISE@AUSTIN.RR.COM) with any questions or requests.

A \$150 per person DEPOSIT IS REQUIRED WITH THIS APPLICATION (Suites, triple and quad occupancy \$300pp)  
 I ELECT TO MAKE ALL PAYMENTS BY CHECK  I ELECT TO MAKE ALL PAYMENTS BY CREDIT CARD

NAME ON THE CREDIT CARD: \_\_\_\_\_ SIGNATURE OF OWNER: \_\_\_\_\_

CREDIT CARD NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_  
 I WISH TO MAKE EQUAL MONTHLY PAYMENTS OF MY BALANCE DUE THROUGH AUGUST 15, 2010  
 I WISH TO MAKE 4 PAYMENTS OF MY BALANCE DUE BETWEEN NOW AND AUGUST 15, 2010  
 PAYING IN FULL

FULL LEGAL NAMES AS THEY APPEAR ON YOUR PASSPORT \_\_\_\_\_ ARE YOU U.S. CITIZENS ? YES \_\_\_\_\_ NO \_\_\_\_\_

(1) \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

(2) \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ WORK PHONE # \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMERGENCY CONTACT NAME: \_\_\_\_\_ PHONE # \_\_\_\_\_

Paradise Vacation and Travel Co., Inc. is an agent only for its principals, the airlines, hotels, cruise operators, tour operators, motor coach operators and other suppliers of travel arrangements, accommodations, and entertainment services throughout the world, and, as an agent, is not and can not be held liable for any negligence or wrongful acts, errors, or omissions on the part of any such supplier of travel arrangements, accommodations, or services which may result in any Death, Damage, Loss, Injury, Delay or Inconvenience to you. Your purchase and retention of airline and/or cruise tickets or other travel documents from Paradise Vacation and Travel Co., Inc. or the use of reservations for travel accommodations procured from this agency constitutes an acknowledgement of and consent to the forgoing limitation of liability.

CHECK: ( ) INSIDE CABIN @ \$1,400 PER PERSON X 2 = \$2,800 before 4/15/10 ( ) \$2,900 after 4/14/10 for two

( ) BALCONY CABIN @ \$1,650 PER PERSON X 2= \$3,300 before 4/15/10 ( ) \$3,400 after 4/14/10 for two

( ) SUITE @ \$2,350 PER PERSON X 2 = \$4,700 before 4/15/10 ( ) \$4,800 after 4/14/10 for two

( ) I AM MAKING MY OWN FLIGHT ARRANGEMENTS AND PLEASE DEDUCT \$500 PER PERSON  
(Arriving no later than 2:30PM on 11/19/10 and departing no earlier than 11:30AM on 11/27/10)

I/WE WILL APPLY FOR TRAVEL INSURANCE PROTECTION  I/WE DECLINE TRAVEL INSURANCE

ARE THERE ANY SPECIAL MEDICAL CONDITIONS, OR DIETARY NEEDS WE SHOULD BE MADE AWARE OF?  
PLEASE LIST: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Signature authorizes Paradise Vacation and Travel Co., Inc. to process credit card charges for all amounts when due. Additionally, by your signature above you agree that you understand the terms and conditions for notification in writing of any changes and or cancellations/penalties as well as your responsibility to have the proper travel documents and punctuality for scheduled sailings.