

Super Bowl Weekend Cruise aboard the Royal Allure of the Seas February 7 – 10, 2025



Why stay at home and watch the Super Bowl, when you can enjoy all the fun aboard this cruise ship with so much fun, food and drinks.

Ports of call: Miami, FL; Day at Sea; Nassau, Bahamas; Miami, FL

Your travel package includes:

- 3 Nights aboard the Royal Caribbean Allure
- All taxes and port charges

Your Travel Package does not include Roundtrip air, to/from pier transfers, vacation protection, shore excursions, and spa services.

All rates are based on per-person

Double Occupancy Inside Cabin \$500 per person	Double Occupancy Oceanview Cabin \$600 per person	Double Occupancy Balcony Cabin \$900 per person
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(Please note all rates are subject to change)

The cruise reserves the right to impose a fuel supplement on all guests if the fuel price exceeds USD 65.00 per barrel.

A \$100 per person deposit is due at booking

(All payments are non-refundable & non-transferable)

Mandatory scheduled payment of \$150 per person is due on the 15th of April, July and October

All Sales are Final

Remaining Balance Due: November 15, 2024

(After this date booking will be canceled)

Contact Information: Tina Price, (240) 277-2292

Email: TPExpresstravel@gmail.com

Form of Payment:

Cash App (\$travelwithtina)

Venmo (@TravelwithTina)

Credit Authorization Form

No money order or check accepted

Cruise Booking Worksheet

Today's Date:	TP Enterprise Express Travel Agency
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	Full Legal Name & Gender	Date of Birth		Full Legal Name & Gender	Date of Birth
1			3	N/A	
2			4	N/A	

Sailing Date:	February 7 – 10, 2025	Ship Name:	Allure of the Seas
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Cruise Line:	Royal Caribbean	Group Name:	Super Bowl Weekend Cruise
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Address: _____

City, State, Zip: _____

Mobile Phone: _____	Alternate Phone: _____
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E-Mail: _____

Passports: Required

Yes – **We strongly Suggest you do not sail on a cruise with a passport.**

No – All non-passport guests will be required to sign a form stating “I’m attending this cruise without a passport.”

Cancellation Insurance:

Include –Yes, I will purchase travel insurance based on the provided payment link. Benefits include trip cancellation or interruption.

[Click Here to Purchase Travel Insurance](#)

Emergency Contact Info	Name: _____	Phone Number: _____
	Relationship to you: _____	

Special Request/Needs (Need to know ASAP) _____

Type of Cabin: Inside Cabin Oceanview Cabin Balcony Cabin

I/we are aware of any cancellation policies and agree not to dispute or attempt to charge back any payments made towards our cruise booking.

_____ Please initial, that you agree with all the above terms and agreements.

_____ Please initial, that you have read and agree to all of our Terms & Conditions with booking your travel package with TP Express Travel and that all payments are **NON-Refundable & Non-Transferable.**

We strongly suggest you purchase travel insurance.

I/we are aware that TP Express Travel Agency shall not be liable for any cancellation or otherwise caused by shutdown due to COVID-19, war or threat of war, riots, terrorist activity, industrial disputes, natural and nuclear disaster, fire, adverse weather conditions or technical problems due to schedule changes.

_____ Please initial, that you agree with all the above terms and agreements.

Please print clearly or type

Ernestine “Tina” Price
 PO Box 944, Lusby, MD 20657
 Please mail the form back or fax it to 1-800-746-3610

Ernestine 'Tina' Price
Owner/Agent of TP Enterprise Express Travel Agency
Post Office Box 944
Lusby, MD 20657
Email: TPExpresstravelconsultant@gmail.com
Website: <http://www.TPEnterprise.com>
240-277-2292 (Office) - 1-800-746-3610 (Fax)

Credit Card/Debit Authorization Form

I, _____, hereby authorize Ernestine "Tina" Price of TP Enterprise Express Travel Agency/Celebrity Cruise Line to charge my credit/debit card

Card Number no. _____

Expiration date: _____ and your 3 or 4 security code _____ from the back or front of your card in the amount of \$_____ for the following services: 2025 Super Bowl Weekend Cruise aboard the Royal Caribbean Allure of the Seas Ship.

Please circle the type of card

Visa Master Card

Name: _____ (Name on the Card)

Address: _____ (Billing address)

City State Zip

Phone Number: _____

Email: _____

I/we are aware of any cancellation policies and agree not to dispute or attempt to charge back any of the above signed and acknowledged charges. A monthly payment is required.

Cardholder's Signature: _____

Date: _____

**All transactions are non-refundable & non-transferable
I/we were offered Travel Insurance.**