

JAMAICA CRUISE CELEBRATION 2026

Lil Nate & Zydeco Big Timers

OCT.03 - OCT.10, 2026

Cruise only rates are per person including, port, fees, taxes,
 (Deposits Partial or Full are Non-Refundable) **Full deposit is 250.00 per person** (Optional insurance up to 199.00 p.p)
 Rates starting@ 898.00 per person rate (Inside/Double) 763.00 per person (Inside/Triple)
 1093.00 per person rate (Oceanview/Double) 894.00 per person (Oceanview/Triple)
 1273.00 per person rate (Balcony/Double) 1013.00 per person (Balcony/Triple)

Rates are subject to change until full cabin deposit of 250.00 per person is received

| DATE | DAY | PORT | ARRIVAL | DEPARTURE |
|----------|-------|-----------------|-------------|-------------|
| 10/03/26 | SAT | GALVESTON | | 03:30:00 PM |
| 10/04/26 | SUN | FUN DAY @SEA | | |
| 10/05/26 | MON | FUNDAY @SEA | | |
| 10/06/26 | TUE | JAMAICA | 08:00:00 AM | 05:00:00 PM |
| 10/07/26 | WED | GRAND CAYMAN | 07:00:00 AM | 04:00:00 PM |
| 10/08/26 | THURS | COZUMEL, MEXICO | 09:00:00 AM | 05:00:00 PM |
| 10/09/26 | FRI | FUN DAY@SEA | | |
| 10/10/26 | SAT | GALVESTON | 08:00:00 AM | |

1st PARTIAL DEPOSIT of 75.00 per person due ASAP

2nd PARTIAL DEPOSIT of 75.00 per person due by MAY 10, 2025

FULL DEPOSIT of 100.00 per person due by JUN 10, 2025

THE FINAL PAYMENT per person DUE ON/OR BEFORE JUN 20, 2026

| | |
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| <p>Forms of payment Only We Do Not accept credit cards All checks, Money Orders and/or Cashier's checks are to be mailed... (ZELLE transfer using: divineaffiliates@gmail.com) by login on your online account to make transfer to email address only NOTE: you can also set-up your Bank or Credit Union's BILL PAY</p> | <p>Please make all payments to: DIVINE DESTINATION AFFILIATES P.O. BOX 91052 HOUSTON, TX 77291 Bus: (713) 417.5409 divineaffiliates@gmail.com</p> |
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DREAM CRUISE- RESERVATION FORM – OCT 03, 2026

| | | | | |
|---|--|------------|-------------------------------------|---|
| Cabin Category Choice (x) | Inside | Ocean View | Balcony | Referred by: |
| Everyone must have Birth Certificate and ID or Passport | | | | |
| Form must be signed at the bottom and have an emergency contact person's name and number | | | | |
| Name: | | | | Gender: _____ D.O.B _____ |
| Email: | | | State _____ Zip _____ | Any Celebrations: |
| Telephone: | | | | cruise with carnival before yes ____ no ____ T-Shirt size: |
| Roommate: | | | | Gender: _____ D.O.B _____ |
| Email: | | | State _____ Zip _____ | Any Celebrations: |
| Telephone: | | | | cruise with carnival before yes ____ no ____ T-Shirt size |
| Notice/ DisClaimer | No refunds will be issued in the event of no-shows, any type of disruptive behavior or interruptions on your behalf, no birth certificate or ID, no passport, any type of cancellations, cancellations received late, day of or after the start of the cruise, deposits (partial or full) are non-refundable and not included in optional insurance. <u>All rates are subject to change until full cabin deposit per person.</u> Name changes are 75.00 per person, depends on cruise sailing if eligible, all bookings for this private event MUST be made thru this agency, any outside bookings will not be allowed to participate in any private events associated with this agency/cruise. The cruise line has the right to make any changes before final payment for all guest, it may affect the rate of your cruise. for all triple cabins , your cabin is not confirmed until full deposit per person any cancelations from your cabin the rate reverts to a higher double rate at time of cancellation. offer is capacity controlled and may not be combinable with any other discount or promotional offer. We reserve the right to refuse your service at anytime for reasons that may conflict with the cruise line or agency's procedures | | | |

Form of Payment: M.O _____ Check: _____ Bank or Credit Union **(ZELLE)** _____ your Bank or CU **Bill Pay** _____

This form should be returned complete and signed to finalize your cruise vacation

I HAVE READ AND UNDERSTAND THE TERMS AND CONDITIONS OF THIS VACATION

Signature: _____ Date: _____

Emergency Contact Name _____ Emergency Contact Number _____

(Your emergency contact is someone who will not be going on the cruise)