

Be Wowed By Carnival's VISTA



Shoot Hoops
Ping-Pong/Putt-Putt

Join VagCo on an 8-Day Cruise Aboard the VISTA

1st IMAX
Theatre at
Sea

August 12-20, 2017

Dr. Seuss
Bookville

8-Day Exotic Southern Caribbean Cruise Itinerary

Day	Port of Call	Arrival	Departure
Saturday	Miami, FL		04:00pm
Sunday	Fun Day at Sea		
Monday	Grand Turk	07:00am	02:00pm
Tuesday	LaRomana, DR	09:00am	04:00pm
Wednesday	Curacao	01:00pm	10:00pm
Thursday	Aruba	08:00am	04:00pm
Friday	Fun Day at Sea		
Saturday	Fun Day at Sea		
Sunday	Miami, FL	08:00am	

Payment Plan

\$100 per person deposit due – 4/11/2016
 \$150 per person payment – 8/11/2016
 \$100 per person payment – 12/12/2016
 \$100 per person payment – 4/11/2017
 Final Payment - May 18, 2017

All cruise package costs are per person and based on double occupancy. Please call for rates for Triple/Quad and Ocean View cabins. Deposit of \$250 due at booking.

Cruise Package Includes: cruise, port charges and taxes and prepaid gratuities. Round trip air and transfers will be added to the package prior to sailing.

Cruise Cost

4E Inside - \$1280.00
 4F Inside - \$1285.00
 8C Balcony - \$1850.00

Cancellation Policy

\$250.00 per person – cancel by May 30, 2017
 50.0% per person of cruise cost – cancel by June 19, 2017
 75.0% per person of cruise cost - cancel by July 15, 2017
 Full Penalty – July 30, 2017



For additional information contact: Vernita A. Grimes, VagCo Meeting and Travel Service: 202-584-3700; Fax: 202.584.5202; Email: Vernita@vagco.com. Make checks payable to VagCo and mail to: VagCo, 611 Pennsylvania Avenue, SE, #220, Washington, DC 20003. You may fax or email your credit card payment along with the completed reservation form to Vernita. Also, check us out at www.vagco.com

Name: _____ Date of Birth: _____

Roommate's Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone #: _____ Cell #: _____ Email Address: _____

Cabin: 4C _____ 4E _____ 8C _____ Amount \$ _____ Check _____ Cash _____ Money Order _____

Name on Credit Card: _____ No. _____ Exp. Date _____ Code _____