

**4-day Cruise from NEW YORK CITY to
CANADA
"CARNIVAL GLORY"**

JUNE 24th – JUNE 28th 2010

Thursday	New York	Sunday	Fun Day at Sea
Friday	Fun Day at Sea	Monday	New York
Saturday	St. John, New Brunswick, Bay of Fundy		

PRICE INCLUDES: Cruise • Port/Government Taxes • All Cruise Meals
PRICE PER PERSON -- DOUBLE OCCUPANCY

INSIDE	OCEAN VIEW	BALCONY
\$425 1 st & 2 nd person	\$495 1 st & 2 nd person	\$555 1 st & 2 nd person
3 or 4 in cabin \$400 pp	3 or 4 in cabin \$450pp	3 or 4 in cabin \$490 pp

RESERVATIONS:	ASAP (first come)	\$100 Per Person*
2 nd Payment:	December 15, 2009	\$150 Per Person
3 rd Payment:	February 15, 2010	\$150 Per Person
Final Payment a MUST	April 1, 2010	Balance in Full

Check or Money Order Payable to: **EJ's Enterprise** Mail to: **P.O Box 50082, Fort Myers FL 33994**
For more info., Current Single, 3rd & 4th . person rates, and Credit Card payments call: **EJ's (201) 755-1055**

Cancellations Policy Per Person Svc. Charges:

Prior to April 10, 2010: \$50 pp
75-31 Days Prior to Sailing Date: 50%
30 to 9 Days Prior to Sailing Date: 75%
8 DAYS OR LESS: NO REFUND

Travel Insurance is the personal responsibility of each passenger
If you are mailing separate reservation forms PLEASE INDICATE WHO YOUR CABIN MATE IS. **AIRLINE TICKETS ARE NON-REFUNDABLE**

Credit Card Authorization Form on the back

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Cut and mail this reservation form with your deposit – **EJ's Enterprise P.O. Box 50082. Fort Myers FL 33994**
Your signature(s) below indicates that you are in agreement with the terms listed on this flyer.

Reservation Form for: CARNIVAL "GLORY" JUNE. 24th - 28. 2010

CHECK WHICH APPLIES: Balcony Ocean view Inside Cabin Double Triple Quad

PLEASE PRINT THE **LEGAL NAME** YOU WILL USE WHEN TRAVELING. **LEAD PASSENGER MUST SIGN**

Please PRINT & SIGN Full Name	Complete Address	INCLUDE ZIP CODE	Phone #'s (including area code)
1. PRINT NAME:			Home
			Work
ADDRESS:			E-Mail
	SIGN:		DOB:
2. PRINT NAME:			DOB:
3. PRINT NAME:			DOB:
4. PRINT NAME:			DOB:

IMPORTANT INFORMATION

**4-DAY CANADA CRUISE FROM
New York City on the "CARNIVAL GLORY"
JUNE 24 – 28 2010**



Go to www.carnival.com to view cabins, and information about onboard activities, regulations, tours, travel tips, etc.

Carnival reserves the right to reinstate the fuel supplement at \$9 per person, per day if the NYMEX oil price exceeds \$70 per barrel.

TRAVEL/CRUISE INFORMATION: and related travel documents will be mailed to you approximately 2 to 3 weeks prior to the cruise, or handed out at a bon voyage party, the date and place will be announced later. These documents should be read and examined very carefully and kept in a safe place along with your proof of citizenship and photo ID.

PORTS OF CALL:

THUS. NEW YORK CITY – depart 5PM

FRI. "Fun Day at Sea"

SAT. – ST. JOHN – 8AM – 5PM

SUN. – AT SEA

MON. NEW YORK CITY 8AM

UNITED STATES PASSPORT REQUIREMENT

The U.S. Government now requires that all U.S. Citizens must present proof of citizenship in the form of a **PASSPORT**. Please make appropriate arrangements to comply with this new documentation requirement. For further information please visit www.travel.state.gov. To get a passport application please visit www.travel.state.gov/passport. All guests without proper documentation will **NOT** be allowed to board the vessel and **NO REFUND** will be issued. U.S. Alien Residents need a valid alien resident card.

INSURANCE: You may purchase your own insurance independently or you can contact us for an application.

MEDICAL SERVICES: There is no provision for dialysis on board. Bring all of your necessary medications. Guests pregnant 27 weeks or more at the time of departure will not be permitted to sail. If you have personal health concerns it is highly recommended to purchase travel insurance.

Mail to: EJs Enterprise, P.O. Box 50082, Fort Myers FL 33994

201.755.1055

www.ejstravevents.com

ejstiffany@msn.com

CREDIT CARD AUTHORIZATION

I _____ hereby authorize Carnival cruise Lines to charge my

_____ in the amount of \$ _____

credit card name

credit card number

expiration date

for cruise payments for myself and/or _____

full name(s) of guest(s) if other than the cardholder

sailing aboard the **CARNIVAL GLORY JUNE 24 – 28 2010.**

I understand in the event of cancellation, penalties may be assessed.

Card Holder's Signature _____