

# 2015 Iowa Academy of Family Physicians Winter CME CRUISE CRUISE REGISTRATION



Aboard the Celebrity Constellation  
January 16- January 24, 2015

Ship Departs from Ft. Lauderdale, FL  
Ports- Gustavia, St. Barts; St. Croix, U.S.V.I.;  
San Juan, PR and Labadee, Haiti

## CRUISE REGISTRATION (all fees are per person)

### Circle your choices

Deluxe Ocean View Stateroom w/balcony, based on double occupancy	\$1259.00
Taxes and Fees	\$84.85
Gratuities	\$96.00

### Cruise Deposit/ Payment Schedule

- Initial Deposit of \$250.00 per person at the time of booking
- Final Payment: Balance due no later than November 1, 2014

### Cruise Cancellation/Attrition

- Between 30-69 days prior to sailing the cancellation penalty is \$250.00 per guest.
- Between 8-29 days prior to sailing the cancellation penalty is 50% of the total price.
- Between 7-0 days before until sailing date there is no refund.

Please note that we expect the cruise to sell out so please register ASAP to assure your spot! To register by phone: Call the IAFP Office at 515-283-9370. To register by email please attach the form and send to [kcox@iaafp.org](mailto:kcox@iaafp.org). To register by fax send completed form to 515-283-9372. To register by mail send completed form to the IAFP at 100 E Grand Ave Suite 170, Des Moines, Iowa 50309

\_\_\_\_\_  
Legal Name of 1st Person in Cabin  
(If more than 2 people traveling fill out separate form)

\_\_\_\_\_  
Legal Name of 2<sup>nd</sup> Person in Cabin

\_\_\_\_\_  
Date of Birth/Citizenship

\_\_\_\_\_  
Date of Birth/Citizenship

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone#

\_\_\_\_\_  
Emergency Phone #

\_\_\_\_\_  
Fax

\_\_\_\_\_  
E-mail Address

## PAYMENT INFORMATION FOR CRUISE

Cruise payments will go the LeisureCorp Travel Agency

TOTAL FOR CRUISE TO LEISURECORP: \$ \_\_\_\_\_

\_\_\_\_\_ Credit Card Type - please circle AX Visa MasterCard Discover \_\_\_\_\_ Check (make check out to LeisureCorp)

\_\_\_\_\_  
Name (as it appears on the card)

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
CCV Code (three digit code on the back of the card)

You must register for the CME portion of the cruise separately this can be done by going to  
<https://iaafp.wufoo.com/forms/2015-iafp-winter-cme-cruise/>