



JOIN NORMA AND HER FIRST MATE
and THE GRAND CHAPTER ORDER of the EASTERN STAR of NEW JERSEY ON A CRUISE
TO BERMUDA ON BOARD THE NORWEGIAN ESCAPE

Sunday, September 1 – Sunday, September 8, 2019

YOUR CRUISE TO BERMUDA INCLUDES

- Roundtrip Motorcoach Transportation from Harbor Square (formerly The Shore Mall), Toms River, and Clifton, NJ to the Manhattan Cruise Terminal (*including driver gratuities, based on 50 passengers. Should the number be less, rate is subject to increase.)
- Baggage handling at the pier in Manhattan
- Seven (7) Nights' accommodations on board the **NORWEGIAN ESCAPE** (including cruise taxes, government fees & port expenses– subject to change at the discretion of the cruise line)
- All included meals and entertainment while on board the **NORWEGIAN ESCAPE**
- One (1) hour Cocktail Party hosted by the Grand Chapter of the Eastern Star
- **ULTIMATE BEVERAGE PACKAGE** * (*Valued at over \$700 per person ~ *Applies only to the 1st & 2nd Guest sharing the same cabin and includes service charges– additional guests do not qualify. Terms & Conditions apply as per Norwegian Cruise Line)
- **FOUR (4) MEAL SPECIALTY DINING PACKAGE*** Specialty Dining Restaurants include: Teppanyaki, Le Bistro, Cagney's Steakhouse, Moderno Churrascaria and La Cucina. (*Applies only to the 1st & 2nd Guest sharing the same cabin and includes service charges– additional guests do not qualify. Terms & Conditions apply as per Norwegian Cruise Line)
- **Prepaid Shipboard Gratuities** – for restaurant and stateroom services
- Services of a Professional Boscov's Travel Escort (based on a minimum of 50 full paying passengers)

RATE PER PERSON*

INSIDE Category
Category IA - \$1,498

BALCONY Categories

Category BD - \$1,868

Category BC - \$1,878

Category BB – \$1,888

Category BA – \$1,898

Oceanview Categories
available upon request

*Rates based on double occupancy. All rates and categories are subject to availability at time of booking.

YOUR CRUISE TO BERMUDA ITINERARY

Day	Port of Call	Arrive	Depart
SEPT 1	New York City, NY		4:00PM
SEPT 2	Day at Sea		
SEPT 3	Day at Sea		
SEPT 4	Royal Naval Dockyard	8:00AM	Overnight
SEPT 5	Royal Naval Dockyard		Overnight
SEPT 6	Royal Naval Dockyard		3:00PM
SEPT 7	Day at Sea		
SEPT 8	New York City, NY	7:00AM	

All itineraries are subject to change without notice.



OPTIONAL: GROUP DELUXE TRAVEL PROTECTION PLAN

Extensive plans to help protect your trip. We encourage all travelers to purchase a plan at the time of initial trip deposit.

\$93 per person, Category IA

\$115 per person, Categories BD,BC,BB,BA

Travel Protection Plan becomes NON-REFUNDABLE 14 days from date of purchase.



General Terms and Conditions

RESERVATIONS: A deposit of **\$250 per person** will be necessary in order to secure your cabin (**\$500 per person** will be required for **SINGLE OCCUPANCY** accommodations). Any cabins requiring triple and/or quad occupancy will require the full deposit of **\$250 per person**, along with **FULL LEGAL NAMES & DATES OF BIRTH**. Triple and Quad occupancy cabins are based on availability at time of booking as these cabins are very limited in number. The balance will be due to us by **MONDAY, APRIL 29, 2019**.

PAYMENTS: You may charge any portion or the entire amount to your Boscov's Charge, MasterCard or Visa. If paying by check, make it payable to **Boscov's Travel**.

GUARANTEE OF RATES: All rates and space are subject to availability at time of booking. Cruise taxes, port expenses and government fees are subject to change at any time without notice at the discretion of the cruise line. All increases would be the responsibility of the tour participant and must be paid in full prior to departure. Reservations paid in full at time of increase/change would not be exempt. Failure to pay these charges would result in denied boarding/travel.

ULTIMATE BEVERAGE PACKAGE/FOUR (4) MEAL SPECIALTY DINING PACKAGE: The Ultimate Beverage Package & Four (4) Meal Specialty Dining Package is inclusive of service charges and is only available to the 1st & 2nd guest sharing the same cabin. Additional guests in the same cabin do **NOT** qualify. Terms & Conditions apply per Norwegian Cruise Line and these packages can be removed or withdrawn at any time at the cruise line's discretion.

CANCELLATION: Cancellations result in a costly process involving telephone calls, correspondence, record adjustments, refund checks, etc.; therefore, an administrative fee of **\$25.00 per person** will be assessed, in addition to any non-refundable costs. **IN ADDITION**, for cancellations made between 119 days and 91 days prior to sailing, **25% of the tour cost** will be assessed, in addition to any non-recoverable costs. For cancellations made between 90 days and 61 days prior to sailing, **50% of the tour cost** will be assessed, in addition to any non-recoverable costs. For cancellations made between 60 days and 31 days prior to sailing, **75% of the tour cost** will be assessed, in addition to any non-recoverable costs. Cancellations made 30 days or less prior to sailing will receive **NO REFUND**.

OPTIONAL TRAVEL PROTECTION PLAN: Group Deluxe Travel Protection is **OPTIONAL** and **NOT** included in the price quote above. If you decide to purchase a Travel Protection Plan, it is encouraged at the time of initial trip deposit. Plans help provide coverage for Trip Cancellation/Interruption, Baggage Delay/Loss, Missed Connection, Emergency Accident and Sickness Medical Expense, Emergency Evacuation/Repatriation of Remains, and more! These are only the highlights of the plan so please refer to your Plan Document for benefit limits and specifications. Travel Protection Plan becomes **NON-REFUNDABLE** 14 days from date of purchase.

VERY IMPORTANT: Optional Travel Protection Plan rates are based on double occupancy and on the rates as listed on this flyer. Should anything additional be added to your booking to increase your per person cost, your travel protection plan rates may increase in order to provide complete coverage of your package.

TRAVEL DOCUMENTS: All United States citizens must carry a **VALID U.S. PASSPORT** with expiration date **AT LEAST SIX (6) MONTHS** beyond the last day of travel. If you don't have a passport, contact Joey Bell-Dumoff at 609.383.1880 for information on how to apply for one. **NOTE:** Due to cruise line security measures, your passport name **MUST** match your cruise line ticket name or you may be denied boarding. **IMPORTANT:** We recommend that our clients traveling abroad take a photocopy of their passport. It should be packed separately from your actual passport. We also recommend leaving a copy at home with your emergency contact.

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GENERAL LIMITATIONS AND EXCLUSIONS

Insurance benefits are not payable for any loss due to, arising or resulting from: 1. suicide, attempted suicide or any intentionally self-inflicted injury of You, a Traveling Companion, Family Member or Business Partner booked to travel with You, while sane or insane; 2. an act of declared or undeclared war; 3. participating in maneuvers or training exercises of an armed service, except while participating in weekend or summer training for the reserve forces of the United States, including the National Guard; 4. riding or driving in races, or speed or endurance competitions or events; 5. mountaineering (engaging in the sport of scaling mountains generally requiring the use of picks, ropes, or other special equipment); 6. participating as a member of a team in an organized sporting competition; 7. participating in bodily contact sports, skydiving or parachuting, hang gliding or bungee cord jumping; 8. piloting or learning to pilot or acting as a member of the crew of any aircraft; 9. being intoxicated, or under the influence of any controlled substance unless as administered or prescribed by a Legally Qualified Physician; 10. the commission of or attempt to commit a felony or being engaged in an illegal occupation; 11. normal childbirth or pregnancy (except Complications of Pregnancy) or voluntarily induced abortion; 12. dental treatment (except as coverage is otherwise specifically provided); 13. amounts which exceed the Maximum Benefit Amount for each coverage as shown in the Schedule of Benefits; 14. due to a Pre-Existing Condition, as defined in the Policy. The Pre-Existing Condition Limitation does not apply to the Emergency Medical Evacuation or return of remains coverage; 15. medical treatment during or arising from a Trip undertaken for the purpose or intent of securing medical treatment; 16. a mental or nervous condition, unless hospitalized for that condition while the Policy is in effect for You; 17. due to loss or damage (including death or injury) and any associated cost or expense resulting directly from the discharge, explosion or use of any device, weapon or material employing or involving chemical, biological, radiological or similar agents, whether in time of peace or war, and regardless of who commits the act and regardless of any other sequence thereto.

The following limitation applies to Trip Cancellation: All cancellations must be reported to the Travel Supplier within 72 hours of the event causing the need to cancel. If the event delays the reporting of the cancellation beyond the 72 hours, the event should be reported as soon as possible. All other delays of reporting beyond 72 hours will result in reduced benefit payments.

Additional Limitations and Exclusions Specific to Baggage and Personal Effects: Benefits are not payable for any loss caused by or resulting from: breakage of brittle or fragile articles; wear and tear or gradual deterioration; confiscation or appropriation by order of any government or custom's rule; theft or pilferage while left in any unlocked or unattended vehicle; property illegally acquired, kept, stored or transported; Your negligent acts or omissions; or property shipped as freight or shipped prior to the Scheduled Departure Date; or electrical current, including electric arcing that damages or destroys electrical devices or appliances.

Pre-Existing Conditions Exclusion

Your plan contains a Pre-Existing Conditions provision which may have an impact on your insurance coverage. Pre-existing Condition means an injury, sickness or condition of you or your traveling companion, family member or your business partner scheduled or booked to travel with you within the 180 day period prior to the Effective Date of Your Trip Cancellation coverage under the plan. Please refer to the Plan Document for the complete definition of a pre-existing condition.

Purchase Up to Final Trip Payment for Pre-Existing Condition Waiver!

The Pre-Existing Condition Exclusion will be waived if the protection plan is purchased at or before final trip payment for the trip, for the full non-refundable cost of the trip and you are not disabled from travel at the time you pay the premium.

PLEASE REFER TO THE PLAN DOCUMENTS FOR A COMPLETE DESCRIPTION OF COVERAGE.

This document contains highlights of the plan. The plan contains insurance benefits underwritten by the United States Fire Insurance Company under form series T210. C&F and Crum & Forster are registered trademarks of United States Fire Insurance Company. The Crum & Forster group of companies is rated A (Excellent) by AM Best Company 2018. The plan also contains non-insurance Travel Assistance Services that are provided by On Call International, and not by United States Fire Insurance Company or Travel Insured International. Coverages may vary and not all coverage is available in all jurisdictions. Individuals looking to obtain additional information regarding the features and pricing of each travel plan component, please contact Travel Insured.

Reservation Coupon

Send to: **Boscov's Travel, Atlantic City, Harbor Square Mall, 6725 Black Horse Pike, Egg Harbor Twp., NJ 08234.** For more information, call **Joey Bell-Dumoff at 609.383.1880** or email at **jbell-dumoff@boscovs.com**.

____ I would like to join **NORMA AND HER FIRST MATE & THE GRAND CHAPTER ORDER of the EASTERN STAR of NEW JERSEY** on board Norwegian Cruise Line's **NORWEGIAN ESCAPE** sailing to **BERMUDA, SEPTEMBER 1-8, 2019.**

____ My **FULL** deposit of **\$250 per person** is enclosed for _____ # of person(s); **[\$500 per person will be required for Single Occupancy]**

____ I am interested in transportation to the Manhattan Cruise Terminal from:

____ Harbor Square Mall (Formerly Shore Mall) _____ Toms River _____ Clifton

____ I wish to add **OPTIONAL TRAVEL PROTECTION PLAN** (Based on Double Occupancy)

____ **\$93 per person – Category IA**

____ **\$115 per person – Categories BD, BC, BB, BA**

*******Should anything additional be added to your booking to increase your per person cost, your travel protection plan rates may increase in order to provide complete coverage of your package. Travel Protection Plan becomes non-refundable 14 days after purchase.**

____ I decline **Travel Protection Plan** _____ Initials _____ Date

Due to security requirements any name changes after documents are issued will incur a change fee.

FULL LEGAL NAME (S) MUST BE LISTED EXACTLY AS THEY APPEAR ON YOUR PASSPORT INCLUDING MIDDLE NAMES AND/OR INITIALS.

A COPY OF YOUR PASSPORT WILL BE REQUIRED IN ORDER TO CONFIRM YOUR BOOKING.

#1 First Name _____ Middle Name _____ Last Name _____

Gender: __Male __Female Date of Birth _____ Passport Number _____ Date of Expiration _____

#2 First Name _____ Middle Name _____ Last Name _____

Gender: __Male __Female Date of Birth _____ Passport Number _____ Date of Expiration _____

#3 First Name _____ Middle Name _____ Last Name _____

Gender: __Male __Female Date of Birth _____ Passport Number _____ Date of Expiration _____

#4 First Name _____ Middle Name _____ Last Name _____

Gender: __Male __Female Date of Birth _____ Passport Number _____ Date of Expiration _____

Street Address _____ City _____ State _____ Zip _____

Daytime phone () _____ Cell phone () _____ Email Address _____

Category Selected _____ Rate per Person _____ Latitudes Number(s) _____ / _____

Cruise Dining: **DINING IS FREESTYLE ON BOARD NORWEGIAN CRUISE LINES – DINING ROOM IS NON-SMOKING**

Special requests: (Wheelchairs, special services, diet, etc...) _____

Are all passengers U.S. Citizens? ____ Yes ____ No. If No, What Nationality _____

Emergency Contact Name: _____ Phone () _____ Relationship _____

IMPORTANT: I have read and agree to the attached terms and conditions of the operator participant agreement and I authorize the use of my credit card if indicated as form of payment.

Signature

Date

____ I wish to use my **BOSCOV'S CHARGE**** # _____

____ I would like the **12 month No Interest**
(**on purchases of \$299 or more)

****Please see your Boscov's Travel Specialist for details.**

____ I wish to use my **MASTERCARD/VISA** # _____ EXP: _____ Security Code: _____

____ I wish to pay by **CHECK** – please make check payable to **BOSCOV'S TRAVEL** CHECK # _____



