

Coach & Cruise Adventure

March 5 – 17, 2025

TravelOnly

CANADIAN CHRISTIAN
TOURS

INCLUDES

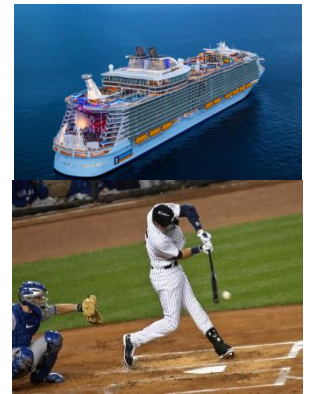
- Round-trip deluxe Motorcoach transportation from Burlington & St. Catharines ON
- All hotel accommodations (7 nights)
- 6 Days/5 Nights Royal Caribbean Serenade of the Seas Cruise departing Tampa
- Admission for tours and attractions as listed below
- 13 days/ 12 nights with 12 breakfasts, 7 lunches & 5 dinners included (cruise includes all meals)
- Royal Caribbean Serenade of the Seas – Cozumel & Costa Maya, Mexico & 2 days at sea
- Creation Museum in Kentucky
- Toronto Blue Jays Spring Training Game
- Beautiful Charleston, SC
- Historic St Augustine, FL
- A fun in the sun day at Clearwater Beach
- Billy Graham Library & Cove in North Carolina
- All taxes (itinerary subject to change without notice)



Royal Caribbean Serenade of the Seas Cruise Departing Tampa

ITINERARY (subject to change without notice)

		PORT	ARRIVE	DEPART
Sun	Mar 9	Tampa		4:00 pm
Mon	Mar 10	At Sea		
Tues	Mar 11	Cozumel	7:00 am	6:00 pm
Wed	Mar 12	Costa Maya	8:00 am	5:00 pm
Thurs	Mar 13	At Sea		
Fri	Mar 14	Tampa	7:00 am	



MOTORCOACH & CRUISE PACKAGE COSTS (Canadian \$)

Inside Cabin: Double \$1899 pp / Triple \$1869 pp / Quad \$1849 pp
 Oceanview: Double \$2099 pp / Triple \$2069 pp / Quad \$2049 pp
 Balcony: Double \$2199 pp / Triple \$2169 pp / Quad \$2149 pp

Please call for Single occupancy rate.

Payable by Credit Card (Visa, MasterCard or American Express)
 or by Cheque payable to TRAVELONLY

DEPOSIT \$300 CAD per person at time of booking

BALANCE DUE: December 1, 2024

Limited availability (54 passengers)

Deposit refundable until December 1, 2024 / \$25 per person cancellation fee applies after
 December 1, 2024 – non-transferrable and non-refundable

Trip is dependent on minimum number of reservations / no cancellation fee if trip is cancelled

Prices subject to change if US/CAD dollar exchange rates change significantly

Itinerary subject to change without notice

Not included in price: Some lunches & dinners (non-cruising days), gratuities for driver & meal tips

To book your trip, or for more information, contact:

Dave Smith 905-641-3053 / 1-877-641-3053

BeyondADream@TravelOnly.com www.beyondadream.ca

TravelOnly Corporate Office 519-752-4363 / TICO #04316071

TravelOnly

BeyondADream

COACH & CRUISE ADVENTURE - MARCH 5 - 17, 2025

BOOKING FORM

If you have not travelled with us before, or if your information has changed, please complete this form.

Single parties please complete 1 form each / Couples complete only 1 form

Send booking form by: E-mail beyondadream@travelonly.com or Mail with form(s) & passport photocopy to TravelOnly Beyond a Dream, PO Box 20373, St. Catharines ON L2M 7W7 (don't email credit card numbers, please phone in the number)

Legal Name as it appears on your I.D. (Please print) ↕ Usually called ↕ Birthdate (month/day/year)

Legal Name as it appears on your I.D. (Please print) ↕ Usually called ↕ Birthdate (month/day/year)

Address ↕

Citizenship ↕

City & Province ↕

Postal Code ↕

Home Phone # ↕

Alternate Phone # (i.e. work or cell) ↕

E-mail Address ↕

Emergency Contact: Name ↕

Relationship ↕

Home Phone # / Alternate Phone # ↕

Special Needs (ie. use wheelchair) / Diabetic / Drug Allergies (please list) / Food Allergies (please list) ↕

Please cross-reference me with the following people (for travelling & hotel accommodations): ↕

If you are celebrating a special event, please indicate below: ↕

___ Please initial if you would like to receive occasional emails from us to inform you about our upcoming trips

TRAVEL INSURANCE: Yes please contact me with quotes for (Please check one):

All Inclusive (includes Cancellation & Medical) or Cancellation only or Medical only

No I have insurance elsewhere and do not wish to receive a quote. By signing below I am declining all travel insurances. I understand that I will assume all financial loss associated with my travel arrangements and will not hold TravelOnly Beyond a Dream, or their Agents responsible for any expenses incurred before or during my trip.

Signature (declining insurance) _____ Date _____

Please specify your Cruise Stateroom choice:

Inside Cabin: ___ double ___ triple ___ quad

Oceanview: ___ double ___ triple ___ quad

Balcony: ___ double ___ triple ___ quad

Number of passengers ___ x \$ _____ = _____ (Total cost of trip)

I authorize TravelOnly Beyond a Dream to process the above transactions to my credit card.

Credit Card # _____ Expiry Date _____ Security Code _____

Card Holder Name _____ Signature _____ Date _____

For credit card charges requested on a card in which the card holder is not travelling with this tour,
A Third Party Authorizaton Form will be requested.