



# Cruising the Pacific Coast!

April 24- May 2, 2026

INSTRUCTIONS: Please complete the information and send to Jeanie's Journeys with your payment as soon as possible. One Registration Form per person is required to be confirmed on the tour. By submitting this registration form, you are agreeing to Jeanie's Journeys terms & conditions. See website for details. Tour is first come, first served!

PLEASE PRINT CLEARLY. FILL IN ALL BLANKS. If does not apply please enter N/A. Please fill out one form for each person.

Where did you hear about this tour?(Check One)

Online \_\_\_\_\_ Community Center \_\_\_\_\_ Which Community center? \_\_\_\_\_

Other: \_\_\_\_\_ Previously traveled with us \_\_\_\_\_

Are you active or Retired Military: Yes \_\_\_\_\_ No \_\_\_\_\_

NAME: \_\_\_\_\_

Full Legal Name

First

Middle

Last

PREFERRED NAME: \_\_\_\_\_

For Nametag

BIRTHDAY: \_\_\_\_\_

Required

ADDRESS: \_\_\_\_\_

Street

Apt Number

City

State

Zip

MOBILE PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Passport Number and Exp Date: \_\_\_\_\_

Frequent Flyer, TSA PreCheck, Suncountry, Etc #: \_\_\_\_\_

ROOMMATE(if Applicable): \_\_\_\_\_

First

Last

OCCUPANCY:

Inside: \$1,999 Double \_\_\_\_\_ \$2,998 Single \_\_\_\_\_ Oceanview: \$2,449 Double \_\_\_\_\_ \$3,229 Single \_\_\_\_\_

Balcony: \$2,899 Double \_\_\_\_\_ \$3,969 Single \_\_\_\_\_ Mini Suite: \$2,939 Double \_\_\_\_\_ \$4,229 Single \_\_\_\_\_

DEPOSIT: \$500 Per Person

FINAL PAYMENT DATE: January 9, 2026

SLEEPING ARRANGEMENTS: 1 BED: \_\_\_\_\_ 2 BEDS: \_\_\_\_\_ DOESN'T MATTER: \_\_\_\_\_

TRAVEL INSURANCE: Price per person DUE AT BOOKING

I would like TRAVEL INSURANCE at per person: Yes \_\_\_\_\_ No \_\_\_\_\_

Inside: \$164 Double \_\_\_\_\_ \$246 Single \_\_\_\_\_ Oceanview: \$201 Double \_\_\_\_\_ \$265 Single \_\_\_\_\_

Balcony: \$238 Double \_\_\_\_\_ \$325 Single \_\_\_\_\_ Mini Suite: \$241 Double \_\_\_\_\_ \$347 Single \_\_\_\_\_

Travel insurance is Non-Refundable. Cancel for Medical Reason ONLY. If nothing is checked you will NOT be enrolled in insurance.

Rates for Travel insurance including Princess Plus: Inside Double \$203 Single \$285 Oceanview Double \$240 Single \$304 Balcony Double

\$277 Single \$365 Suite Double \$280 Single \$386 Per Person

PLEASE TURN PAGE TO FILL OUT COMPLETELY

**Princess Plus: \$60 Per day Per Guest (Total \$480):** I would like to add Princess Plus. Yes \_\_\_\_ No \_\_\_\_  
INCLUDES: Wi-Fi (\$25 a day without PP), Crew Appreciation (\$16 per day w/o PP), Plus Beverage Package up to \$15 each (\$65 per day w/o PP), unlimited juice bar, desserts (2 per day), fitness class (2 per cruise), room service delivery.



These tours are more strenuous in their Difficulty Level and require **5-7 plus miles of walking per day**. Travelers who require the use of a cane, walker or wheelchair or are in need of physical assistance to walk are encouraged to sign up for our **Level ONE Difficulty Tours**.

**Initial:** \_\_\_\_ I Understand that this is a Level THREE Difficulty Tour with 5-7 plus miles of walking per day. I am fully capable of walking 5-7 plus miles without assistance.

**Notes to Organizer (food allergies, handicap room, etc):** \_\_\_\_\_

**EMERGENCY CONTACT:** Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

**PAYMENT:** Please check one(Check preferred):      CHECK: \_\_\_\_\_ CREDIT CARD: \_\_\_\_\_

Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVS three (or four if Am Ex) letter code: \_\_\_\_\_

Total Amount Enclosed: \_\_\_\_\_

For assistance with reservations:  
please call Jeanie at 612-229-5276  
Or email Jeanie at Jeanie@Jeanies-Journeys.com  
Jeanie's Journeys 954 Wakefield Ave Saint Paul, MN 55106

**Travelers Needing Special Assistance**

Jeanie's Journeys cannot provide special individual assistance to tour members with special needs for walking, dining, airport assistance or other routine activities. Jeanie's Journeys will make reasonable efforts to accommodate the special needs of tour participants. However, you will be required to have a companion who is capable and totally responsible for providing assistance for you while traveling. You must report any disability requiring special assistance at time of sign up. See flyer for more details

**OFFICE USE ONLY**

**Deposit Date:**

**Payments Made:**

**Travel Insurance Policy:**

**Date Purchased:**

**Tour Cost:**

**Travel Insurance Claim Number:**

**Date Canceled:**

**Cancellation Method:** Writing Call Email

**Refunded:** Yes No **Date Refunded:**

**Amount Refunded:**

**Refund Method:**

**NOTES:**