



# NORWEGIAN BREAKAWAY

## Leaving from New Orleans

### 17-24 February 2019

2/17/19/SUN - New Orleans depart 4pm; 2/18/19/MON – At Sea; 2/19/19/TUE – Cozumel (Mexico) 8a-5p;  
 2/20/19/WED – At Sea; 2/21/19/THU – Harvest Cay (Belize) 8a-4p; 2/22/19/FRI – Costa Maya (Mexico); 2/23/19/SAT –  
 At Sea; 2/24/19/SUN – New Orleans Arrive 7am

**Cabin Group Availability & all rates below include port & govt taxes:**  
**Balcony (BD) - \$1387.00PP Insurance \$99.00pp**  
**Inside (IA) - \$997.00pp Insurance \$71.00pp**

\*\*Note Oceanview Rates are available upon request & if booked can be added to the group & receive perks

**The above stateroom categories are eligible for 2 perks from list below:**

- Ultimate Beverage Package (89.00pp per day plus 20% gratuities per day value) Guest 1 and 2
- Prepaid Gratuities (13.99pp per day value) Guest 1 and 2
- 250 Internet Minutes per cabin
- 50.00 per port shore excursion credit per cabin
- Specialty Dining up to 4 restaurants for guests 1 and 2 (up charges for restaurant & 13.80 gratuities value)
- \$75.00 On Board Credit per cabin

Special Promo \$50.00 per person refundable deposit promo is prevailing and can change per NCL at the time of booking

Final payment due no later than: 5 October 2018  
 Group Space will be released 01Sep2018

**Cancellation Penalties:**

- 121 or more days – deposit is fully refundable
- 120-91 days prior to sailing – 25% non refundable (penalties begin 20 Oct 18)
- 90-61 days prior to sailing – 50% non refundable
- 60-31 days prior to sailing – 75% non refundable
- 30 days or less- 100% non refundable

Call Tammy's Journeys – 850-243-3809 Email: [tammy@tammysjourneys.com](mailto:tammy@tammysjourneys.com)

Website: [www.tammysjourneys.com](http://www.tammysjourneys.com)

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Name on passport: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Name on passport: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Billing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ (Cell)  
 Email: \_\_\_\_\_  
 Credit Card: (Circle One) AMEX Discover MasterCard VISA  
 Credit Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_  
 Insurance: (Circle One) YES \_\_\_\_\_ NO \_\_\_\_\_ and fully aware of above cancel terms