VFW SOUTHERN CONFERENCE 2027
December 3–10, 2027
Norwegian Epic Cruise Registration Form

IMPORTANT:

US Passport books are highly recommended.
All names must match exactly (first-middle-last) as they appear in your passport book.

Guest 1:

Last:	First:	Middle:
Date of Birth:		
Passport #:	Expiration Date:	
Departure Airport (If flying):	TSA #:	
Seat Preference:	NCL Latitude Number:	

Guest 2 :

Last:	First:	Middle:
Date of Birth:		
Passport #:	Expiration Date:	
Departure Airport (If flying):	TSA #:	
Seat Preference:	NCL Latitude Number:	

Names Preferred on Name Badges (First and Last):

1. _____ 2. _____

Lead Passenger Information

Name: _____

Street Address: _____

City, State, ZIP: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

What is included:

Your rate includes **7 nights aboard the Norwegian Epic**, an **Unlimited Open Bar Package**, **3 Specialty Dining Experiences**, **150 minutes of Wi-Fi**, **pre-paid gratuities**, a **$25 onboard credit per person**, $50 shore excursion per cabin and an **exclusive VFW Cocktail Reception.**

Cabin prices are based on double occupancy.

☐ Balcony Cabin Category - $1,490.00 per person

☐ Club Balcony Cabin Category - $1,669.00 per person

A minimum deposit of $250.00 per cabin is due at booking ($125.00 per person non-refundable).

Final payment is due July 19, 2027

Are you interested in Travel Insurance (additional cost)? ☐ YES ☐ NO

Balcony Cabin $110.00 per person
Club Balcony Cabin $127.00

Credit Card Authorization #1

Card Type: ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover
Name on Card: _____
Card Number: _____
Expiration Date: _____ Security Code: _____
Billing Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____
Cardholder Signature: _____ Date: _____

Credit Card Authorization #2

Card Type: ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover
Name on Card: _____
Card Number: _____
Expiration Date: _____ Security Code: _____
Billing Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____
Cardholder Signature: _____ Date: _____