

Create a Romance that Endures!

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Registration Form to Cruise May 23 -May 31, 2009

Please Print Name

Address

City

State

Zip

Telephone Number

Email Address

Referred by: _____ or **Radio Promo** Flyer
Print Person's Name

Email Promo Other: _____ let us know!
Please make checks, money orders, and cashier's checks payable to

Hope Providers, Inc.

Return to:

Hope Providers, Inc
PO Box 69-3393 Miami Florida 33269

Email: carolhope19@msn.com

www.powerandopportunityworkshops.com

Contact: Michael & Carol Hope* Phone: 786-337-596, 786-274-2606

Down payment of \$600.0 must be received by November 1, 2008

*\$300.00 by December 1, 2008,

*\$300.00 by January 1, 2009

*\$300.00 by February 1, 2009 and

*Final payment of \$299.00 by February 28, 2009.

Total cost of \$1,799.00.

Receive \$50 on board credit to spend as you like!

All payments must be completed by February 28, 2009

You may elect to pay \$1,699.00 by Nov. 1, 2008

You Save \$100.00 + Receive \$50.00 on board credit to spend as you like!

Visa Master Card Check Money Order Cashier's Check Cash

Note: This information will be held in strict confidence and used only for the purpose indicated. - Management

Name on Card: _____

Card# _____ Expires: _____ CVV _____

Billing Address of card: _____
State & Zip

Authorization Signature: _____ Date _____

Take full payment

Take all payments on due date per payment schedule above