

CARIBBEAN ISLANDS

Dominican Republic & St. Thomas ABOARD THE NORWEGIAN PEARL SAILING FROM PHILADELPHIA



10 NIGHTS ~ FEBRUARY 2 ND ~ 12 TH 2027

Package Includes*

- Transportation to & from Pier in Philadelphia
- Pre-Paid Gratuities Onboard Ship
- Beverage Package with Gratuities
- 4 Dinners per Person in Specialty Restaurants
- Wi-Fi (150 minutes)
- \$50 Shore Excursion Credit
- · \$100 Onboard Credit per Cabin
- Taxes & Port Fees

*Applies only to 1st and 2nd passenger per cabin

Cruise Itinerary

Day 1 Embark from Philadelphia, PA

Day 2 At Sea

Day 3 At Sea

Day 4 At Sea

Day 5 Tortola, British Virgin Islands

Day 6 St. Thomas, US Virgin Islands

Day 7 San Juan, Puerto Rico

Day 8 Puerto Plata, Dominican Republic

Day 9 At Sea

Day 10 At Sea

Day 11 Disembark in Philadelphia, PA

A VALID PASSPORT IS REQUIRED FOR THIS CRUISE

Passport expiration date must be more than 6 months from the return date of your cruise

\$2,889 \$4,199

per Person Double*

per Person Single*

Balcony Cabin, Category BA, Double Occupancy



Please note; Gratuities for bus drivers or baggage handlers at the cruise terminal are not included. While tipping for these services is not required, it is customary. Typically \$5 per person each way on the bus and \$3 per bag at the terminal is fair but of course the amount is up to you.

EXPLORE 4 BEAUTIFUL PORTS OF CALL



Enjoy a once-in-a-lifetime experience on a Caribbean cruise aboard Norwegian Pearl for 10 exciting nights visiting 4 ports. Take in the beautiful turquoise waters and the laidback Caribbean vibes on Long Bay Beach in Tortola. Greet the green sea turtles and colorful fish as you snorkel the turquoise waters of Turtle Cove, in St. Thomas. For stunning views, take a cable car ride to the peak of Mount Isabel de Torres in Puerto Plata.

ENJOY ALL THE PEARL'S AMMENTITIES



Norwegian Pearl® is a mid-sized ship with a relaxed atmosphere and elegant décor. Mealtime is a superstar on Pearl, as she offers many chic dining options – including the complimentary 24-hour Eatery, O'Sheehan's Neighborhood Bar & Grill, two steakhouses (Cagney's and Moderno Churrascaria) and much more. Looking to turn things up a notch? Head to Bliss Ultra Lounge & Night Club or stop by our dazzling casino, then wind down at the tranquil Mandara Spa®. When it comes to accommodations, she has endless choices and her sophisticated design and first-class amenities make this ship an excellent choice.



CARIBBEAN ISLANDS RESERVATION FORM

Price per Person Double Occupancy:

\$2,889.00

(Non-Member Add \$50.00)

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\$4,199.00

(Non-Member Add \$50.00)

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Single TRIPLE OCCUPANCY NOT RECOMMENDED

Prices are subject to fuel surcharges by the bus companies

Due to unforeseen circumstances, all hotels and visits are subject to changes until departure.

A \$250.00 deposit, per person, is required to make your reservation. Final payment is due by: September 7, 2026

	CANCELLATION POLICY
119-91 days prior to departure	\$300.00 Service Fee + any cancellation penalties imposed by venders + 25% cruise fee
90 - 61 days prior to departure	\$430.00 Service Fee + any cancellation penaltles imposed by venders + 50% cruise fee
60 - 31 days prior to departure	\$430.00 Service Fee + any cancellation penalties imposed by venders + 75% cruise fee
30 days to departure	100% of FULL TRIP COST plus any cancellation penalties imposed by vendors

Above listed cancellation penalties will apply to all travelers. We recommend that you purchase a travel protection plan to help protect you and your travel investment against the unexpected. For your convenience, we offer a travel insurance plan through Travelex Insurance Services. For more information and rates, refer to the 360" Group Premier product flyer insert. Travel Insurance is offered on behalf of and under the direction of Travelex Insurance Services. The Travel Protection Plan premium is non-refundable after the 15-day review period, if you have departed on your trip, filed a claim or plan to file a claim. You must be medically fit to travel at the time you purchase the coverage. Rates are subject to change and may vary by state of residence. To view state specific fraud warnings, visit: http://www.travelexinsurance.com/company/fraud-warning/. Travelex Insurance Services, Inc. ("Travelex Insurance") maintains an updated list of alert and financial defaults on its website available at: http://www.travelexinsurance.com/customer-service/travel-a lerts/travel-supplier. Please go to http://www.travelexinsurance.com/customer-service/travel-a lerts/travel-supplier. Please go to http://www.travelexinsurance.com/

** TRAVEL PROTECTION PLAN CANNOT BE PURCHASED AFTER YOU HAVE MADE FINAL PAYMENT **

TRAVELEX 360° GROUP PREMIER TRAVEL PROTECTION PLAN	Double Occupancy	Single Occupancy
Up to Age 59	\$234.00	\$361.00
Age 60 - 74	\$300.00	\$463.00
Age 75 +	\$338.00	\$523.00

For Reservations & Additional Information Please Call Kate O'Rourke at 302.645.9293

PLEASE SUBMIT (1) TEAR-OFF REGISTRATION FORM FOR EACH PERSON TRAVELING

DETACH HERE

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10-NIGHTS NCL CARIBBEAN ISLANDS FEBRUARY 2~12, 2027

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	ALL	INFORMATION	IS REQUIRED 8	MUST	TATCH PASSPO			-
PROPER NAME						DATE OF BI	RTH REQUI	RED
ADDRESS				CITY			STATE	ZIP CODE
ROOMING WITH:						THEIR DAT	E OF BIRTH	REQUIRED
U.S CITIZEN?		DEPOSIT PAID:	PHONE NO.:		EMAIL ADDRESS:			
1 / V	Ve would li	ike to purchase the	offered Travel Protec	tion Plan. I	/ We have read and	understand	the policy	which includes

YES full coverage terms, including exclusions and limitations, and Travel Protection Plan Flyer, which includes important consumer information, plan highlights and rates. To view the policy, visit: http://policy.travelexinsurance.com/GPZ-1023

NO I/We have been advised that Travelex Protection Plan is available at an additional cost and I/We DO NOT wish to purchase trip protection.

IMPORTANT: It is the responsibility of each travelerspurchasing the Travelex 360° Group Premier Travel Protection Plan to read the Policy and familiarize themselves with the terms and conditions of the plan. For questions regarding benefits or coverage, please contact Travelex Insurance Services at 888-574-7026 and reference plan number GPZ-1023. To view state specific fraud warnings, visit: http://www.travelexinsurance.com/company/fraud-warning



Plan highlights

- · Trip cancellation/interruption benefit includes:
 - Sickness, injury, or death!
 - Inclement weather & natural disasters
 - Financial insolvency² & labor strike
 - Involuntary unemployment

- · Primary coverage, no deductibles3
- · Medical evacuation
- · 5-hour travel delay benefit
- · 3-hour missed connection benefit
- · 12-hour baggage delay benefit
- · Fast online claims4

360° Group Premier plan rates³

Trip cost	0-59	60-74	754
\$0	\$36	\$47	\$64
\$1 - \$250	\$44	\$58	\$81
\$251 - \$500	\$57	\$74	\$105
\$501 - \$1,000	\$86	\$114	\$168
\$1,001 - \$1,500	\$109	\$143	\$211
\$1,501 - \$2,000	\$149	\$191	\$211 \$215
\$2,001 - \$2,500	\$191	\$245	0.0000000000000000000000000000000000000
\$2,501 - \$3,000	\$234	\$300	\$277
\$3,001 - \$3,500	\$276	\$354	\$338
\$3,501 - \$4,000	\$270 \$319		\$400
\$4,001 - \$4,500	\$361	\$409	\$461
\$4,501 - \$5,000		\$463	\$523
\$5,001 - \$5,500	\$404	\$518	\$584
\$5,501 - \$6,000	\$446	\$572	\$646
	\$489	\$627	\$707
\$6,001 - \$6,500	\$531	\$681	\$769
\$6,501 - \$7,000	\$574	\$736	\$830
\$7,001 - \$8,000	\$638	\$818	\$923
\$8,001 - \$9,000	\$723	\$927	\$1,046
\$9,001 - \$10,000	\$808	\$1,036	\$1,169
\$10,001 - \$11,000	\$893	\$1,145	\$1,292
\$11,001 - \$12,000	\$978	\$1,254	\$1,415
\$12,001 - \$13,000	\$1,063	\$1,363	\$1,538
\$13,001 - \$14,000	\$1,148	\$1,472	\$1,661
\$14,001 - \$15,000	\$1,233	\$1,581	\$1,784
\$15,001 - \$16,000	\$1,318	\$1,690	\$1,907
\$16,001 - \$17,000	\$1,403	\$1,799	\$2,030
\$17,001 - \$18,000	\$1,488	\$1,908	\$2,153
\$18,001 -\$19,000	\$1,573	\$2,017	\$2,276
\$19,001 -\$20,000	\$1,658	\$2,126	\$2,399

360° Group Premier plan benefits³

Benefits	Coverage
Trip cancellation	100% of trip cost (up to \$20,000)
Trip interruption	150% of trip cost (up to \$30,000)
Trip interruption—return air only ⁵	\$1,000
Travel delay	\$1,000 (\$250/day)
Missed connection	\$1,000
Baggage & personal effects	\$1,500
Sporting equipment delay ³	\$600
Baggage delay	\$250
Emergency medical expenses ⁶	\$50,000
Emergency dental expenses ⁶	\$500
Emergency evacuation & repatriation	\$250,000
Accidental death & dismemberment	\$10,000
Travel assistance services ⁷	Included

Of you, a traveling companion, family member, or business partner. ³Coverage when plan is purchased at or before the final trip payment. ³All coverage per insured up to the limits listed. Pre-existing medical conditions waiver may vary by state. Coverages may vary and may not be available in all states. Please see the policy for details, or call +1.888.574.7026. Rates are subject to change. ⁴Based on industry average. Fastest payment on approved claims is based on electronic payment of claim. ⁵Coverage for trip interruption and trip interruption-return air only cannot be combined. ⁴\$50 deductible in CT, IN, KS, MO, MT, VT, and WA. ⁷Provided by the designated provider listed in the policy. 10.23 GRPFLY3





Questions about plan benefits?

Call +1.888.574.7026 and use Plan GPZ-1023, or email

360Group@travelexinsurance.com.

Trip cancellation & trip interruption

Protect travel investments and recover nonrefundable prepaid costs if your trip is canceled or interrupted for a covered reason. Popular covered reasons include:

- Sickness, injury, or death¹
- Residence or destination uninhabitable
- Strike
- · Inclement weather
- · Cancel for business reasons
- · Traffic accident en route
- Quarantine
- · Jury duty/subpoena
- · Military duty
- Financial insolvency²
- · Terrorist incident
- Theft of passport/visa
- · Involuntary termination

Travel delay

Reimbursement for reasonable additional costs — such as accommodations, local transportation, and meals — if travel is delayed five hours or longer.

Baggage & personal effects

Reimbursement for personal articles and expenses if bags are lost, stolen, or damaged.

Baggage delay

Reimbursement for reasonable additional personal articles and expenses if bags are delayed for 12 hours or more.

Emergency medical & dental expenses⁶ Emergency medical treatment if sickness or injury occurs while traveling.

Emergency medical evacuation

Includes emergency medical evacuation to the nearest suitable medical facility, help returning home if medically necessary, and repatriation expenses.

Accidental death & dismemberment

Reimbursement for permanent loss of life, limbs, or sight from a covered accidental injury during travel.

Pre-existing medical condition exclusion waiver³ Pre-existing medical conditions are eligible for coverage when:

- · The traveler is medically able to travel at the time of plan purchase
- · The plan is purchased at or before the final trip payment

A pre-existing condition is an injury, sickness, or other condition (excluding any condition from which death ensues) of an insured, traveling companion, or family member traveling with the insured within the 60-day period immediately preceding the insured's plan purchase date.

Plan details

View policy at policy.travelexinsurance.com/GPZ-1023

Unless otherwise stated in the plan, this plan will not pay for any loss arising directly or indirectly out of, or as a result of, or from, or that occur to, or are as a result of the actions of, the insured or the insured's family member, or traveling companion, or business partner for the following; suicide, attempted by a physician; normal pregnancy, resulting children, and alective abortion; participation as a professional in athletics while on a covered trip; participation in organized amateur or interscholastic athletic or sports competition or related practice events; riding or driving in any motor competition; off-road driving, whether as a driver or as a passenger; declared or undeclared war, or any act of war; civil disorder; service in the armed forces of any country; nuclear reaction, radiation or radioactive contamination; operating or learning to operate any aircraft, as pilot or crew, mountain climbing, bunge jumping, snow skiing, skydwing, parachuting, free failing, cliff diving, BA.S.E. or base jumping, hang gliding, parasalting, travel on any air-supported device other shan on a regularly scheduled airline or air cincarter company, or atterme sports; mountaineering where ropes or guides are commonly used including ascending and descending a mountain requiring specialized equipment, including but not limited to anchors, bolts, caraoiners, crampons, lead/top-rope anchoring equipment and pick-axes; scuba diving if the depth of the water exceeds 75 feet; the insured's commission of or atternot to commit a felony; elective medical or holistic treatment or procedurers, failure of any tour operator, common carrier, other travel supplier, person or agency to provide the bargained-for travel arrangements/services; a lost shat results from a sickness, sicease, or other condition, event, or circumstance that cocurs at a time when this policy is active of any or any active of the applicable coverage under this policy; sickness, injury or death if the plan is purchased after entering a hospice facility or

Travelex Insurance Services, Inc. CA Agency License #0D10209. Consumers in Maryland nay contact the Maryland Insurance Administration +1.800.492.6116 or +1.410.468.2340. Insurance coverages underwritten by Zurich American Insurance Company, a New York domiciled company with its principal place of business at 1299 Zurich Way, Scnaumourg, It. 60196 (NAIC # 16535). The terms and conditions of the policy described in this brief summary are governed by the individual policy document that contains the complete terms. In the event of any discrepancy between the information in this brief summary and the policy, the policy document shall govern. This is intended as a general description of certain types of insurance available to qualified customers, provided solely for informational purposes. Policy Form Series #U-TiIV-100-A CW, #U-TIIN-100/110-A CW, #U-TIIN-100-A CW, #U-T

Dream. Explore. Travel On.

Lewes Senior Activity Center 32083 Janice Road Lewes, DE 19958

Trip Application

Caribbean Cruise Curran Travel Inc. (Tuesday, February 2nd – Friday, February 12, 2027)

Trip Application Date:		
moderate physical activity. Walking tours, as well as we should be expected on excito a mile or up to an hour at	Itinerary blends some lon alking slightly longer dista ursions. Excursion tour wo a time.	and 15,000 steps per day. This trip requires ger days with shorter days and more leisure time. nces, up stairs or on uneven walking surfaces ould include guided tours with walking distances up
(IMPORTANT: As it appear	riist Name _ ars on your passport/drive	's license) Middle Name
		ress 2:
City:	State	Zip code
Cell phone:	Email	
Date of birth:	NCL I	_atitudes #:
Emergency Contact while	on trip:	
Name:		Phone:
Relationship to Traveler:		
Cost of Trip: Double Occupa an additional \$50.00 fee.	ancy: \$2,889/pp ; Single O	ccupancy: \$4,199/pp. _All non-members will incur
Deposit due with Trip Applic Check - made out to Lewes Senio	cation: \$250/pp. Final Part Activity Center)	yment Due August 28, 2026. (Cash, Credit, Debit,
Insurance protection is enco to Curran Travel. Pricing in		gencies that may occur. Checks must be made out brochure
Rooming with:		
Telephone #		

Caribbean Cruise, Curran Travel Inc. Application (continued)
Do you need a handicap room requested? Yes No
(Please note: This room cannot be guaranteed, only requested.) If not available, are you still able to travel without a handicapped room? Yes No
The undersigned travels with the Lewes Senior Activity Center (LSAC) at their own risk and agrees to hold harmless and indemnify LSAC, as permitted by law, any claims, liabilities, damages, costs, personal injury, or contraction of disease or virus, which may result relating to this travel arrangement.
The undersigned also agrees to adhere to all group guidelines and bus safety rules outlined at the pretrip meeting and understands and adheres to the trip level as stated above.
The undersigned agrees that they are an independent traveler who can participate fully in the events and activities listed in the brochure. If they are not, there will be a companion travelling with them and responsible for assisting them (e.g., pushing wheelchair, helping them up and down stairs, getting in and out of the bus, etc.).
The undersigned agrees during this time of Covid restrictions, the CDC Vaccination cards should be carried, and mask requirements should be adhered to during this trip to ensure access to all tours and travel modes.
Signature:
Date
Cc: LSAC Traveler

For office use only:

Credit Card Type: _____(Last four digits) _____

Check #

Cash: _____ Staff initials ___

CARIBBEAN ISLANDS RESERVATION FORM

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(Non-Member Add \$50.00)

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PROPER NAME				DATE OF BIRTH REQU	UIRED
ADDRESS			CITY	STATE	ZIP CODE
ROOMING WITH:				THEIR DATE OF BIRTH	A REQUIRED
U.S CITIZEN?	☐ YES DEPOSIT PAID: ☐ NO \$	PHONE NO.:	EMAIL ADDRES	SS:	

_		I / We would like to purchase the offered Travel Protection Plan. I / We have read and understand the policy which includes
	YES	full coverage terms, including exclusions and limitations, and Travel Protection Plan Flyer, which includes importan
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