



# THE TEMPLE OF NYAME (ACRS)

After 7 years we're CRUISING again, to Honor the Ancestors, Water Spirits, and for Health & Prosperity

## CRUISING WITH THE SPIRITS

### CRUISE features

- Luxurious Cabins
- Exquisite Dining
- Great Entertainment
- Casinos, Comedy
- Royal Promenade
- Rock Climbing Wall
- Basketball Court
- Ice Skating Rink
- Spa, Gym, Pools
- Discos, Dancing
- Youth Programs
- Duty-Free Shopping
- Free Room Service

**9 Night Cruise, July 31 – Aug. 9, 2014**



**Speakers  
Presentations &  
Healing**

### Double Occupancy:

Interior staterooms	\$1326.72
	\$1336.72
Oceanview room	\$1836.72
Balcony	\$2106.72

*Prices are per person;  
Includes taxes & fees*

**\$200 deposit due NOW;  
deadline Nov. 3, 2013**

**Departure Port Cape Liberty, New Jersey  
cruising to Bermuda & the Caribbean!**

**King's Wharf, Bermuda  
St. Maarten, Virgin Islands  
San Juan, Puerto Rico  
Labadee, Haiti**

*Perfect for Spiritual Rejuvenation, Family Reunions, Social Clubs, & more!*

### CONTACT INFO:

**301-736-7874 :  
202-722-2776**

CruisingwiththeSpirits@verizon.net

**www.TempleofNyame.org**

Chartered bus service from Maryland to cruise ship is \$100 pp roundtrip. Limited seating. First come, first served for those who pay full \$200 deposit by October 27, 2013.



# CRUISE REGISTRATION FORM



IF INTERESTED IN TRIPLE ROOM OR QUAD, CALL US (301) 736-7874; 202-722-2776  
PAYMENT PLAN MINIMUM \$100 PER MONTH AFTER \$200 DEPOSIT; FINAL BALANCE DUE MAY 2014

## ROOMMATE ONE

Legal Name \_\_\_\_\_

DOB \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Name \_\_\_\_\_

Emergency # \_\_\_\_\_

\_\_6:00pm Early Dining    \_\_8:00pm Late Dining

Credit/Debit Card Name \_\_\_\_\_

Card Type \_\_\_\_\_

Card # \_\_\_\_\_

Expiration \_\_\_\_\_ Security code \_\_\_\_\_

Passport Expiration Date \_\_\_\_\_

## ROOMMATE TWO

Legal Name \_\_\_\_\_

DOB \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Name \_\_\_\_\_

Emergency # \_\_\_\_\_

\_\_6:00pm Early Dining    \_\_8:00pm Late Dining

Credit/Debit Card Name \_\_\_\_\_

Card Type \_\_\_\_\_

Card # \_\_\_\_\_

Expiration \_\_\_\_\_ Security code \_\_\_\_\_

Passport Expiration Date \_\_\_\_\_

Purchase Travel Insurance [www.TempleofNyameTravel.com](http://www.TempleofNyameTravel.com) - click on Travel Guard

Mail Form to Janie Adwoa Carr, 2214 Wyngate Rd, Suitland, MD 20746  
or fax to 301-736-3014