

# Escape to Jamaica



**July 27 – 30, 2025**

Experience the ultimate blend of relaxation and excitement in Jamaica's newest paradise.

Kick off the summer season in style at Jamaica's newest luxury all-adult resort—Princess Senses Mangrove. Nestled along a breathtaking beachfront, this intimate retreat blends sophistication with leisure, offering lavish accommodation and stunning ocean views. Start your escape with a state-of-the-art spa or keep active with top-tier fitness facilities, a multi-sport field, and non-motorized water sports. Prefer a slower pace? Simply soak up the sun on the pristine beach. After action-packed days, savor world-class cuisine at over 13 gourmet restaurants. As night falls, the excitement continues—enjoy themed parties, cocktail soirées, mixology classes, and live entertainment. Catch a spectacular show at the theater, then dance the night away at O'Club nightclub.

## **Your package includes:**

- 4 nights at the Princess Senses Mangrove – Adult Side
- Private to/from airport transfers
- Meals and drinks
- All taxes
- Optional Add-on - Roundtrip Air out of BWI or VIP Club Mobay \$85pp

### **All rates are based on per-person/double occupancy**

\$1125 per person-Deluxe w/out Air \$2100 per person-Deluxe with Air	\$1175 per person-Deluxe Swim-out w/out Air \$2150 per person-Deluxe Swim-out with Air
\$1375 per person-Platinum Club w/out Air \$2350 per person-Platinum Club with Air	\$1450 per person-Platinum Club Swim-out w/out Air \$2375 per person-Platinum Club Swim-out with Air

**\*\*Please note: All rates are subject to change, until the package locks in with a deposit.**

**A \$150 per person deposit is due at booking w/out Air**

**A \$350 per person deposit is due at booking with Air**

(All payments are non-refundable & non-transferable)

**All Sales are Final**

**Remaining Balance Due: June 1, 2025**

(After this date, booking is subject to cancellation with penalty)

**Contact Information:** Travel Booking Agent - Tina Price Office: (240) 277-2292

Email: [TPExpresstravel@gmail.com](mailto:TPExpresstravel@gmail.com) - Website: [www.TPEnterprise.com](http://www.TPEnterprise.com)

**Form of Payment:** Cash App (\$travelwithtina) - Venmo (@TravelwithTina) – Zelle (240-277-2292)

Credit Authorization Form

No money order or check accepted

## Travel Booking Worksheet

The Transportation Security Administration (TSA) requires our customers to provide their full name (**as it appears on your Passport**), date of birth, and gender when round-trip airline tickets are added to your vacation package.

Today's Date:		<b>TP Enterprise Express Travel Agency</b>			
	<b>Full Legal Name and Gender</b>	<b>Date of Birth</b>		<b>Full Legal Name and Gender</b>	<b>Date of Birth</b>
<b>1</b>			<b>3</b>		
<b>2</b>			<b>4</b>		
Resort Name:		Princess Senses Mangrove		Trip Name: Jamaica Escape Trip July 27 – 30, 2025	
Address:					
City, State, Zip:					
Mobile Phone:				Alternate Phone:	
E-Mail:					
<b>Passport Number, Expiration Date, and State the passport was Issue:</b>		Please forward a copy of your passport, for our agency to verify the correct spelling of your name, date of birth, and expiration date.			
Passports: Required		<input checked="" type="checkbox"/> <b>Yes</b>			
Travel Insurance:		<input type="checkbox"/> Yes – I will purchase travel insurance. ( <a href="#">Strongly Suggested</a> ) <b>Click Here to Protect Your Vacation</b>  <input type="checkbox"/> Decline - You will be required to sign a decline insurance waiver form if you decide not to purchase travel insurance and <b>YES</b> , I will risk my whole investment.			
Emergency Contact Info		Name:		Phone Number: Relationship with you:	
Special Request/Needs ( <a href="#">Need to know ASAP</a> )					
Selection of Your Room:		<input type="checkbox"/> Platinum Suite <input type="checkbox"/> Platinum Swim-out <input type="checkbox"/> Deluxe Suite <input type="checkbox"/> Deluxe Swim-out <b>w/Air</b> - <input type="checkbox"/> Platinum Suite <input type="checkbox"/> Platinum Swim-out <input type="checkbox"/> Deluxe Suite <input type="checkbox"/> Deluxe Swim-out			

### Please write clearly or type your information

I/we are aware of cancellation policies and agree not to dispute or attempt to charge back any payments made towards our trip listed above. A set payment installment is required, and if any payments are missed after the due date, a \$30 late fee will be applied to all late/missed payments.

\_\_\_\_\_ **Please initially** agree with all the above terms and agreements.

\_\_\_\_\_ **Please initial**, that you have read and agree to all of our Terms & Conditions with booking your travel package with TP Express Travel and that all payments are **NON-Refundable & Non-Transferable**.

We strongly suggest you purchase travel insurance.

I/we are aware that TP Express Travel Agency shall not be liable for any cancellation or otherwise caused by shutdown due to Covid, war or threat of war, riots, terrorist activity, industrial disputes, natural and nuclear disasters, fire, adverse weather conditions or technical problems due to schedule changes.

\_\_\_\_\_ **Please initially** agree with all the above terms and agreements.

Ernestine "Tina" Price - TP Enterprise Express Travel Agency  
 PO Box 944, Lusby, MD 20657  
 Please mail or fax your form to 1-800-746-3610

Ernestine 'Tina' Price  
Owner/Agent of TP Enterprise Express Travel Agency  
Post Office Box 944  
Lusby, MD 20657  
**Email: [TPExpresstravelconsultant@gmail.com](mailto:TPExpresstravelconsultant@gmail.com)**  
**Website: <http://www.TPEnterprise.com>**  
240-277-2292 (Office) - 1-800-746-3610 (Fax)

## **Credit Card/Debit Authorization Form**

I, \_\_\_\_\_, hereby authorize Ernestine "Tina" Price of TP Enterprise Express Travel Agency/Vendor to charge my credit/debit card

Card Number no. \_\_\_\_\_

Expiration date: \_\_\_\_\_ and your 3 or 4 security code \_\_\_\_\_ from the back or front of your card in the amount of \$ \_\_\_\_\_ for the following services: 2025 Jamaica Escape Travel Package dated for July 27-30, 2025.

### **Please circle the type of card**

Visa      Master Card

Name: \_\_\_\_\_ (Name on the Card)

Address: \_\_\_\_\_ (Billing address)

\_\_\_\_\_  
City                                  State                                  Zip

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

**I/we are aware of any cancellation policies and agree not to dispute or attempt to charge back any of the above signed and acknowledged charges. A monthly payment is required.**

Cardholder's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**All transactions are non-refundable & non-transferable**  
**I/we were offered Travel Insurance.**