

Quilters European Christmas Market River Cruise

December 1-9, 2017

with optional extension – December 9-12, 2017

Limited availability – we are cautioning those interested to register early as our 2016 Christmas Market cruise block was sold out by the end of March this year.

Actual river cruise departs December 2, 2017. Date above allows for one day traveling to arrive the morning of December 2 from the USA to Amsterdam.

I am so glad that you have decided to join this exciting quilters adventure as we explore some of Germany's most historic cities and villages during this special time of year.

IMPORTANT INFORMATION

On the following pages you will find a registration form, and a form to decline travel protection. When filling them out please print legibly in ALL CAPITAL LETTERS and include all information requested.

Travel Protection is optional and available and we encourage all travelers to purchase a plan at the time of initial trip deposit. You may purchase travel protection from me, or from any reputable carrier, however, it is particularly important that should you decline to purchase the optional travel protection from me, you **MUST** include a signed 'Decline Travel Protection' form or your registration will not be processed.

The final payment deadline is, without exception May 25, 2017. Registrations will still be accepted after this date however, full payment is due at time of registration and space is not guaranteed.

Airfare can be arranged for the cruise via Viking Cruise Lines at the time of your cruise booking, rates are subject to your departure airport. You may also choose to book your airfare through any online site, which may be less expensive than booking through Viking. Please remember any quoted airfare is subject to change at ANY TIME.

Final payment invoices will be e-mailed about 30 days before the final payment is due, please sure you keep us updated with any email address change.

Please note – availability and pricing cannot be confirmed until your booking is received and your cabin is booked with the cruise line, cabins are selling that fast.

CATEGORY	Cost per person, double occupancy	Cost per person, single occupancy
F- Standard Outside Window	\$1999	\$3998
E - Standard Outside Window	\$2799	\$4398
D -French Balcony	SOLD OUT	
C-French Balcony	SOLD OUT	
B - Verandah	\$3299	\$6298
A – Verandah (upper deck)	\$3399	\$6798
AA-Suite	SOLD OUT	
Optional Tour	\$1299	\$1895

Price includes port taxes and cruise surcharges.

Travel protection is are approximately 8% of your total trip cost, and may be dependent on age.

When returning your forms, please be certain that you have:

- Enclosed a check for the Cruise Deposit of \$600 USD per person. International residents must send a bank check or money order.
- Signed all applicable forms where indicated.

Checks may be made payable to Deb Roberts' Tours
 Please mail your form and payment to:
 Deb Roberts Tours – 2016 Christmas Market Cruise
 78448 VIA PAVION LA Quinta, CA 92253
 FAX: 760 772-8038

Questions? Please email us at worldofquiltstravel@gmail.com

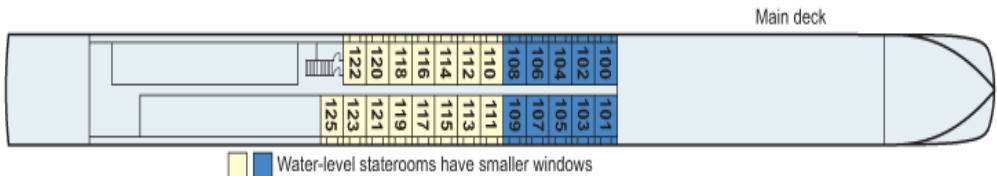
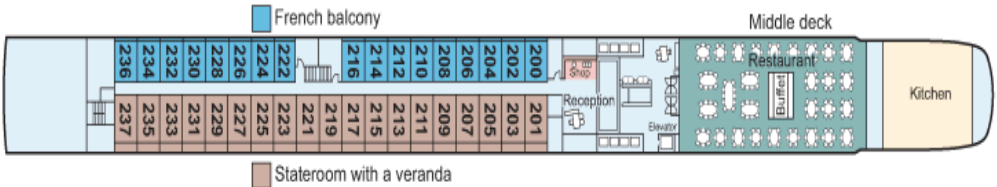
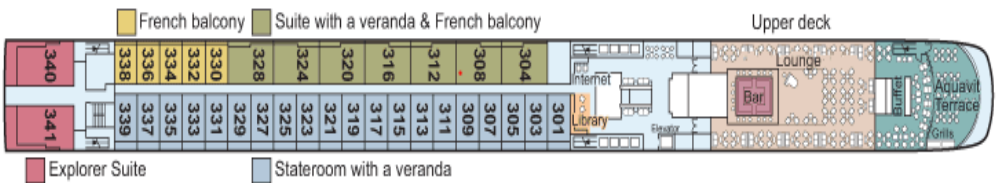
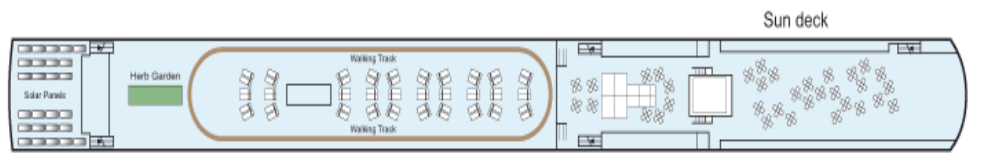
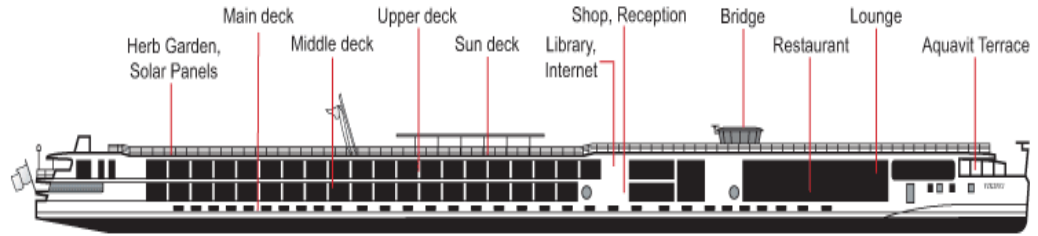
Viking Ship Deck Plans to assist your choice of category

SELECT A STATEROOM TYPE

- EXPLORER SUITE (ES)
- VERANDA SUITE (AA)
- VERANDA STATEROOM (A)
- VERANDA STATEROOM (B)
- FRENCH BALCONY (C)
- FRENCH BALCONY (D)
- STANDARD (E)
- STANDARD (F)

- HERB GARDEN
- WALKING TRACK
- SUN DECK
- LIBRARY
- THE BAR
- AQUAVIT TERRACE
- RECEPTION/LOBBY
- ONBOARD BOUTIQUE
- THE RESTAURANT

- Explorer Suite (ES)
- Veranda Suite (AA)
- Veranda (A)
- Veranda (B)
- French Balcony (C)
- French Balcony (D)
- Standard (E)
- Standard (F)



Water-level staterooms have smaller windows

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Please mail deposit check with a copy of this form to the address given.

PLEASE PRINT IN CAPITAL LETTERS

See rates above – please include roommate request on this form, otherwise we will help find a roommate for you if possible.

Referred by: _____ I am a Previous Traveler with Deb: Yes _____ No _____

Name (as it appears on passport): _____ Birthday (DD/MM/YEAR) _____

Passport Number: _____ Country of Issue: _____ Expiration Date: _____

Address: _____ City _____ State _____ Zip _____

Telephone(_____) _____ Email _____ Nickname: _____

Emergency Contact: _____ Address _____ Phone: _____

Check all that apply:

Cabin Category with Rate as Quoted Above:

I am a past guest on Viking Cruise Lines

F Outside \$1999 E Outside \$2199 D French Balcony \$2799 C French Balcony \$3099 B Verandah \$3199 A Verandah \$3399
 AA Suite \$4099

I wish to participate in the optional extension tour December 9-12 (\$1299/\$1895 single)

I will need transportation to the ship in Amsterdam (\$90)

I will need transportation to the airport in Basel after the cruise ends (\$90) (not applicable to those on optional tour)

Request Twin Cabin – my roommate is: _____ their email: _____

I would like to share a room, but I am willing to pay for a single supplement if a roommate cannot be found. Cruise rate for single – as above.

I am a smoker I snore I stay up late I go to bed early I like to talk I like quiet

Request Single Room (private room). I understand I will pay the single supplement, which is twice the double occupancy cruise fare.

I will be responsible for booking my own airfare. I would like you to book airfare for me through Viking, I acknowledge it may be more expensive than airfare I might find on my own. Airfare rates are not guaranteed until the cruise is paid in full.

I acknowledge that my passport will be valid for a full 6 months after December 12, 2017.

Optional Travel Protection - Rates are approximately 8% of your total tour cost and may be dependent on age.

Accept Travel Protection from Deb Roberts' Tours

I will purchase my own or I decline travel protection (additional form required)

Deposit Payments: Insurance highly recommended. International residents may send a bank check or international money order in US funds only, we cannot accept international personal checks.

Payment by Check: A check made payable to Deb Roberts Tours is enclosed for a deposit of _____ \$600.00 (US FUNDS) for cruise deposit.

I will make my final payment by check or money order. International residents must send a bank check or money order in US funds.

It is my understanding that I will be responsible for the price of the cruise and options as selected above. I further understand that there is a minimum enrollment required for this cruise. Should these numbers not be attained by the final payment deadline all monies will be refunded in the manner paid. **Final payment is due on or before May 25, 2017 without exception, or I am subject to a late fee of 5% and/or loss of space and deposit. Those registering after June 1 will be accepted based on availability – pricing then is not guaranteed.**

By submitting this registration form, I acknowledge that I have read and accept the terms and conditions associated as on the website <http://worldofquiltstravel.com>, along with the full itinerary and pricing inclusions. I will be responsible for the full fare amount including cruise line surcharges and port taxes. If needed, I am responsible to purchase air either on my own or from Viking. I understand and agree that Deborah Roberts is acting as an independent organizer of this cruise and tour, and as such she is not responsible or liable for the willful or negligent acts and/or omissions of a tour company, coach company, cruise line, tour director, hotels, contractors, or any air carrier, their employees, agents, servants, or representatives including, their failure to deliver or their partial or inadequate delivery of travel services, bank closure or other economic event preventing access to funds. All coupons, receipts and tickets are issued subject to the terms and conditions specified by the suppliers and/or air carriers. By utilizing the travel services of the suppliers, I agree that Deborah Roberts shall not be liable for any accident, illness, injury, property damage or personal loss to me or those travelling with me in connection with any accommodations, transportation or other travel related services, or resulting directly or indirectly from any occurrences or conditions beyond its control, including, but not limited to, acts of war or terrorism, defects in vehicles, breakdown in equipment, strikes, theft, delay, bank closure, or cancellation of, or changes in itinerary or schedules. I understand this is a custom group cruise and that activities are planned to best benefit the entire group. As such my personal needs will be my own responsibility and not that of the tour director or tour organizer. Deborah Roberts reserves the right to cancel any tour for any reason as well as the right to decline the registration of any trip participant. At any time, Deborah Roberts reserves the right to cancel the tour/cruise of any participant who in sole her opinion, may affect the health, safety, or enjoyment of other participants. I also understand that there may be a lot of walking and a quick pace associated with port tours or optional excursions on this tour and that all participants need to be in good health and physical condition in order to participate. I have checked with my physician about my ability to travel on this tour. If I require any assistance, I will bring someone to assist me, I understand that the tour organizer or tour director are not responsible for personal assistance. If I have declined travel protection, I acknowledge I am aware of any cancellation penalty associated with my trip and by declining suggested travel protection I am assuming the financial responsibility of those non-refundable penalties should I have to cancel or interrupt my travel. Deborah Roberts is not liable for any part of my penalties or decision.

Signature: _____ Date: _____

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Decline Travel Protection Form

Please fill in and return this form if you have declined trip protection. Your registration will not be processed if you have chosen this option until this form has been received.

Passenger Name: _____

Tour Name: _____

Tour/Cruise Company: _____

I, _____ decline travel protection
(name)

for my trip/tour to _____ departing on
_____. I have read and I am aware of the cancellation penalties associated with my trip and by declining the suggested travel insurance I am assuming the financial responsibility of those non-refundable penalties should I have to cancel or interrupt my travel. And, that neither Deborah Roberts, nor any of her affiliated tour/travel or cruise companies are liable for my penalties or my decision.

Traveler _____ **Date** _____
(Signature)