

A Quilters Journey to Iceland

A Northern Lights Adventure

September 16-23, 2018
Registration Packet

I am so glad that you have decided to join this exciting travel opportunity for our amazing adventure in Ireland. We will be traveling throughout Ireland on our journey visiting historic quilt collections, quilt shops, quilt exhibits and more during Irelands National Quilt Week festivities.

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.

Please review and understand the terms and conditions found online as indicated by the link from the tour website regarding penalties and refunds. The final payment deadline is July 10, 2018. Due to tour supplier regulations, bookings will close on July 10, so please do not hesitate to book, this is already a popular tour.

Please see terms and conditions found at <http://worldofquiltstravel.com>. Insurance is highly recommended. Deposit refunds are subject to a \$100 administration fee if the cancellation request is received more than 7 days after it is received. Refer to our terms and conditions for other details, please.

A passport will be required. Please be certain your passport does not expire for 6 months from the date of when you would return from this tour.

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

1. Included deposit payment by check for \$600, *check made* payable to Deb Roberts' Tours. Final payment reminders will be via email invoice so it is important that you be certain your email address is clearly printed on all forms. International, including Canadian payments must be in the form of bank check or cashier's check, or drawn on a US bank.
2. Indicate whether you wish to pay the discounted price by paying with a check/money order or pay with a credit card for the non-discounted price.
3. Signed all applicable forms where indicated.
4. Included the decline insurance form if appropriate.

YOU WILL RECEIVE A CONFIRMATION OF YOUR REGISTRATION

Please mail form with a copy of forms to:
IRELAND – 78448 Via Pavion, La Quinta, CA 92253
Questions? Email Deb Roberts at textiletours@aol.com

REGISTRATION SHOULD BE RECEIVED BY MARCH 10, 2017 TO INSURE SPACE

ICELAND Northern Lights Tour

September 16-23, 2018

Price: - \$3699 double occupancy, airfare is not included

Single supplements available – for \$1600 additional

Please return this form with deposit to:

Iceland Tour – 78448 Via Pavion, La Quinta, CA 92253 USA

I heard about this tour from: _____

Name (as it appears on passport): _____ Nickname _____

Passport Number _____ Expiration Date: _____ Birthdate: _____

Address _____

City _____ State _____ Zip _____

Telephone(_____) _____ Email _____

Emergency Contact: _____ Address _____ Phone: _____

Check those which apply:

Full Tour Package – paying with check, discounted price of \$3699, single supplement is an additional \$1600

Check one:

Request Twin Room. Roomate Request _____

I would like help finding a roommate. I smoke I go to bed early I stay up late

I would like to share a room, but I am willing to pay for the single supplement if a roommate cannot be found.

Request Single Room (private room - add Single Room supplement of \$1600)

Optional Travel Protection is about 8-10% of the total tour price, depending on the year of your birth. Due to regulations in TX, NY and WA, we cannot offer travel protection to residents in these states. You may purchase insurance from any travel insurance provider, I recommend travelguard.com or allianz.com

Accept Travel Protection Decline Travel Protection (Declined insurance must include signed form with registration)

Deposit Payment: (Refundable for 15 days with written notice, then \$100 is non-refundable.) Insurance highly recommended.

I have enclosed a \$600.00 Payment by Check: A check made payable to Deb Roberts Tours is enclosed. International payments must be money order or cashier's check in USD.

I wish to pay the discounted price above and will pay my final payment with a check or money order.

It is my understanding that I will be responsible for the base price of this tour which does *not* include airfare. I acknowledge the single supplement rates if I have chosen this option. If necessary due to currency fluctuations an adjustment of the final tour price will be applied before the final payment is due. I further understand that a minimum of twenty (20) people need to register for this tour. Should these numbers not be attained by the final payment deadline, prices may be adjusted or the tour canceled. Furthermore, I understand that Final payment is due on or before July 10, 2018 or I am subject to a late fee of 5% and/or loss of space.

Signature: _____ Date: _____

By registering for this tour, I am indicating that I have read and agree to the terms and conditions posted at <http://worldofquiltstravel.com>, along with the full itinerary and pricing inclusions. I will be responsible for the full fare amount of the tour per my selection above, understanding that only if I pay with a check or money order I will receive the discounted price, otherwise the price will be approximately 4% more. By submitting this registration form, I understand that Deb Roberts' Tours (Deborah Roberts) is acting as an independent organizer of this tour and as such she is not responsible or liable for the willful or negligent acts and/or omissions of a tour company, bank, tour director, coach company, guiding services, 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. All coupons, receipts and tickets are issued subject to the terms and conditions specified. 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 her control, including, but not limited to, acts of war or terrorism, economic catastrophe, defects in vehicles, breakdown in equipment, strikes, theft, delay, bank failure, cancellation of, or changes in itinerary or schedules. Deborah Roberts is not liable for injury to me at any time from any reason during this tour, including that resulting from the use of SPA services. I understand this is a custom group tour 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. I also understand that there is a lot of walking and there may be a quick pace on this tour and that all participants need to be in good physical condition in order to fully participate. I have checked with my physician regarding my health and fitness to participate on this tour. I acknowledge that I have been offered travel protection. If I have declined travel protection, I acknowledge I am aware of any cancellation penalty associated with my trip and by declining the suggested travel protection I am assuming the financial responsibility of those non-refundable penalties should I have to cancel or interrupt my travel. And, that Deborah Roberts/Deb Roberts' Tours is not liable for my penalties or decision. I understand that should the currency exchange rate change the price of the tour may be adjusted.

Signature: _____ Date: _____

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 insurance coverage
(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)