

WORLD OF QUILTS TRAVEL
Sue Spargo Tulips & Windmills River Cruise
April 3-12, 2019

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 for this cruise is September 21, 2018. Bookings may be made after this date but are based on availability, once space is confirmed, payment is due and payable.

Airfare can be arranged for the cruise through Viking and often at a very good rate. Please inquire.

Once you have been registered, you are responsible for any and all penalties regardless of the reason of withdrawal from the program. Final payment invoices are e-mailed about one month before the final payment is due, please update us should your email address change. An email address is required for all correspondence.

Cruise Only Cabin Pricing. The cost of travel protection is approximately 8% of your cruise cost. Due to regulations in New York, California travel agents are not able to offer travel protection to residents there without a state specific insurance license. In this case, I recommend travelinsured.com or alliance.com for travel protection.

Please note – availability and pricing cannot be confirmed until your registration is received and booked with the cruise line as cabins are selling quickly.

Cabin prices below reflect a 4% discount for those who would like to pay by check or money order

CATEGORY	Cost per person, double occupancy	Cost per person, single occupancy
F - Standard Outside Window	\$3799	\$7598
E - Standard Outside Window	\$3899	\$7798
D - French Balcony	\$3999	\$7998
C - French Balcony <small>Limited availability</small>	\$4199	\$8398
B - Verandah	\$4299	\$8598
A- Verandah <small>Limited availability</small>	\$4499	\$8998
AA-Suite	\$5899	\$11798

The exclusively designed for the cruise project with Sue, including the kit, is \$250 in addition to the cruise price. Some stitching/hand embroidery experience will be helpful.

There are no cabins available for 3 or more persons on this ship. Cruise prices are capacity controlled for specific categories only and cannot be guaranteed until booking is received and confirmed with Viking.

Each traveler must submit a signed form. When returning your forms, please be certain that you have:

1. Enclosed a check for the full amount for the deposit of \$600 per person
2. Indicate whether you want travel protection, if no please attach decline form
3. Signed all applicable forms where indicated.

Checks may be made payable to Deb Roberts' Tours
Forms may be faxed, but check must be mailed with a copy of forms
to: Deb Roberts Tours
78448 VIA PAVION LA Quinta, CA
92253 FAX: 760 772-8038

Questions? Email Deb Roberts at
textiletours@aol.com

Sue Spargo 10 Day Tulips & Windmills, 2019

Please mail deposit check with a copy of form to: Deb Roberts' Tours 78448 Via Pavion, La Quinta, CA 92253
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 ___

Email Address (Required): _____

Name as it appears on Passport: _____ Nametag name: _____

Passport number: _____ Exp. Date: _____

My country of citizenship _____ Birthdate (M/D/YEAR) _____

Address: _____ City: _____ State: _____ ZIP: _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Check all that apply:

Cabin Category with Rate as Quoted Above: ___F ___E ___D ___C ___B ___A ___AA

___ I wish to participate in the onboard stitching with Sue and understand the exclusive kit is included in the additional cost of \$250

___ I will need round trip transportation to the ship from Amsterdam airport to the pier on the day the cruise begins and ends - \$110 RT

___ Request Twin Cabin – my roommate is: _____

___ I would like to share a room and need help finding a roommate in order to go.

___ I would like to share a room but I am willing to pay for a single supplement if a roommate cannot be found. Single pricing on page above.

___ I am a smoker ___ I snore ___ I stay up late ___ I go to bed early

___ Request Single Room (private room). I understand I will pay the single supplement.

___ I will participate on the cruise even if the quilting portion of the cruise does not meet the minimum enrollment requirement for Sue's classes (20).

___ I will be responsible for booking my own airfare. ___ I would like you to book airfare for me through Viking,

___ I acknowledge that my passport will be valid for a full 6 months after April 12, 2019.

Optional Travel Protection

___ Accept travel protection from Deb Roberts' Tours. Cost is approximately 8% of trip cost and based on year of birth (not available to residents of NY)

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

Deposit Payments: (Refundable for 7 days with written notice, then \$100 is non-refundable. Insurance highly recommended. International residents may send a banque 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 for cruise deposit.

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

___ I wish to make my final payment with a credit card through PayPal. I understand the quoted prices reflect a discount for paying in cash and that the standard cruise (credit card) price is approximately 4% more. I understand I will be invoiced through paypal for the final payment and need an email address to do so. Payment must be made 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 September 21, 2018, without exception, or I am subject to a late fee of 5% and/or loss of space.**

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 all surcharges and port taxes. If needed, I am responsible to purchase air either on my own or from Viking Cruise Lines. I understand that there are no formal classrooms on the ship and project time will be announced for working with Sue during open cruising time. I agree that Deborah Roberts is acting as an independent organizer of this cruise and as such she is not responsible or liable for the willful or negligent acts and/or omissions of a tour 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 and medical 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 the trip as well as 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 my own person to assist me, I understand that the tour organizer is 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: _____

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 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)