

Deb Roberts' Tours
 Quilt Cruise for a Cause
 Hawaii Quilt Cruise registration packet
 Round-trip San Diego to Hawaii

I am so glad that you have decided to join this exciting quilt adventure at sea. It will be an exciting time both at sea and on land as we explore the beauty and cultures of the Hawaiian Islands all while we are supporting leukemia and lymphoma research.

Hawaiian Quilt Cruise: February 4-18, 2012

IMPORTANT INFORMATION

On the following pages you will find a registration form, and a decline insurance form. When filling them out please print legibly and include all information requested.

For travel insurance, fees if purchased through Deb Roberts Tours are listed in the table below. You may purchase travel insurance from me, or from any reputable carrier, however, it is particularly important that should you decline to purchase any insurance protection you **MUST** include a signed 'Decline Insurance' form or your registration will not be processed.

Please be certain that you read and understand the terms and conditions found online as indicated by the link from the tour website. Terms and conditions may be updated periodically, by registering you agree to periodically review the terms and conditions for changes.

The final payment deadline is, without exception November 1, 2011. Registrations will still be accepted after this date, then however, full payment is due at time of registration. If final payment is not made by this time, penalties will be incurred and there will be no refunds. Once you have been registered, you are responsible for any and all penalties regardless of the reason of withdrawal from the program. Insurance is highly recommended.

Please register early as spaces cannot be guaranteed, cabins are selling fast. Some categories may already be sold out.

Refunds for the cruise deposit are available if written notice of cancellation is received by Deb Roberts by certified mail before the final payment deadline. \$100 of the deposit is not refundable after 10 days from registration receipt.

For 3rd or 4th person to a cabin, rates are listed in the table below and apply after the first two people per cabin.

Please do not secure your air arrangements until you are notified that the minimum number of registrations for the cruise have been received.

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

1. Enclosed a check for the Cruise Deposit of \$750 per person. Canadian payments must be in the form of a cashier's check or drawn on a US bank.
2. Signed all applicable forms where indicated.
3. Indicate insurance choice and included the decline insurance form if appropriate.

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 405 Calle Macho San Clemente, CA 92673
 FAX: 949 369-6933

Questions? Email Deb Roberts at textiletours@aol.com

Insurance prices were quoted May, 2010 and are subject to change before the final payment deadline.

CATEGORY	QUILTER PRICE	NON-QUILTER PRICE	3 RD OR 4 TH PERSON TO A CABIN PRICE	Optional INSURANCE
INSIDE	\$2149.00	\$1899.00	\$1279.00 EACH	\$200.00 EACH
OBSTRUCTED VIEW OUTSIDE	\$2299.00	\$2049.00	\$1279.00 EACH	\$225.00 EACH
OUTSIDE WINDOW	\$2549.00	\$2299.00	\$1279.00 EACH	\$250.00 EACH
BALCONY/VERANDA	\$2999.00	\$2849.00	\$1279.00 EACH	\$275.00 EACH
BALCONY SUITE	\$3999.00	\$3849.00	\$1279.00 EACH	\$295.00 EACH

FOR SINGLE PRICING – PLEASE CALL

CABIN PRICES (EXCEPTING SINGLE AND 3RD OR 4TH PERSON/CABIN) ARE PER PERSON DOUBLE OCCUPANCY. APPLICABLE PORT TAXES AND TRANSFERS ARE ADDITIONAL. PLEASE REVIEW INSURANCE COVERAGE PROVIDED ON THE WEBSITE FOR THIS CRUISE

Hawaiian Quilt Cruise for a Cause

February 4-18, 2012

Please return one form per person with deposit for each person to:
Deborah Roberts – Quilt Cruise for a Cause – 405 Calle Macho, San Clemente, CA 92673
or FAX to 949 369-6933 and put form and deposit into mail.

REFERRED BY: _____

Name (as on your passport) _____ Nickname: _____ Passport # _____
Home Phone: () _____ Cell phone: _____ Email(required): _____
Birthdate: _____ Past Passenger # _____
Address _____ City _____ State _____ Zip _____
In case of emergency notify: _____ relationship: _____ phone: _____

Stateroom Category: Inside Outside Obstructed View Outside Window Balcony/Veranda Suite
 I acknowledge the level of pricing as indicated on page one (above).

I am a quilter and will take classes Yes No (non-quilters will be charged the non-quilter rate)

Room arrangement: Twin or queen bed? _____

Include Holland America Air to San Diego: _____ From what airport? _____

I will arrange my own air I will require airport to ship transfers (\$34 round trip)

I will not require air arrangements

Payment Information

Final payment deadline has passed, full payment is due with registration.

Roommate Request: _____ Phone () _____

If you are traveling alone, would you like us to help you find a roommate? _____

If yes, please answer all that apply:

I am a smoker I wake up early I go to bed early I am a smoker I wake up early I go to bed early

I am traveling alone and will pay the single supplement

Insurance Information: Your registration will not be processed unless this section has been completed and signed. Travel insurance rates will be sent upon request once category and cabin have been determined. Insurance is applied when final payment is received.

I plan to purchase travel protection insurance from Deb Roberts' Tours

I decline insurance coverage and have enclosed the decline insurance form

I will travel on this cruise even if the quilting portion of the cruise is canceled due to lack of enrollment.

As the final payment deadline has passed, full payment is due at the time of registration. Please email for details and an invoice will be sent to you which will include port fees and surcharges as well as insurance pricing if requested.

Signature: _____ Date: _____

I acknowledge that I have read and understand each page of the terms and conditions found at <http://worldofquiltstravel.com>. I agree with the cruise terms along with the full itinerary, pricing and penalty inclusions. I will be responsible for the full fare amount that I have selected, plus additional port taxes. If I have selected an air option, additional fares and cruise line regulated taxes which will be added into my final payment invoice. If I require air to SAN unless I have selected the HACL Air option above, I understand that I am responsible for my own air arrangements. I understand that Holland America Cruises may impose a fuel supplement at any time prior to departure should the price of oil go above \$70/barrel, even if my cruise has been paid in full. By submitting this registration form, I understand and agree that Deborah Roberts is acting as an independent organizer of this tour utilizing the services of Holland America Cruise Lines and as such she is not responsible or liable for the willful or negligent acts and/or omissions of a cruise or tour company, 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. 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, or cancellation of, or changes in itinerary or schedules. I understand this is a custom group tour and that activities are planned to best benefit the entire group. I understand my personal needs will be my own responsibility and not that of the tour director or tour organizer. Deb Roberts' Tours is not responsible for typographical errors or omissions. I have checked with my physician regarding my health and fitness to travel on this cruise/tour. If I have declined insurance coverage, I acknowledge I am aware of any cancellation penalty 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. Deborah Roberts will not be liable for my penalties or decision. I understand that World of Quilts Tours and itineraries are the intellectual property of Deb Roberts' Tours and as such protected by copyright law.

Signature: _____ Date: _____

DECLINE INSURANCE FORM

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

Form to Decline Trip Insurance

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)