

Deb Roberts'  
Houston Quilt Festival and Caribbean Cruise  
Registration Packet

I am so glad that you have decided to join this exciting textile study opportunity quilting opportunity. We will have a great time enjoying the Houston Quilt Festival, a one of a kind event which we will follow with an incredible Caribbean Quilting Cruise Opportunity.

**IMPORTANT INFORMATION**

On the following pages you will find registration forms for the Houston Quilt Festival and Caribbean Cruise get-away. Please fill out all forms completely, as well as the decline insurance and credit card information forms as applicable. Payments will only be accepted in US funds

It is particularly important that should you decline the optional insurance, in either case you **MUST** include a signed 'Decline Insurance' form or your registration will not be processed.

Please be certain that you 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 August 15, 2008. Should someone register after this date, full payment is due at time of registration. Please register early as spaces cannot be guaranteed.

Penalties for the cruise portion of this tour will begin on August 18, 2008, no cruise refunds can be made after this date. Refunds for the cruise only portion of the tour are available if written notice of cancellation is received by Deb Roberts on or before August 15, 2008. 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. Deposits on the remainder of the tour are refundable per instruction on the registration page.

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

1. Included credit card information for cruise – the deposit is \$500 per person, and please include a copy of credit card front & back and photo ID.
2. Submit deposit using personal check, cashier's check, money order or credit card.
3. Signed all applicable forms where indicated.
4. Included the decline insurance form if appropriate.

Forms may be faxed, but check must be mailed with a copy of forms to:  
Textile Tours - 1841 Tahiti Dr. - Costa Mesa, CA 92626  
**Questions? Email Deb Roberts at [textiletours@aol.com](mailto:textiletours@aol.com)**

# Houston Quilt Festival and Mediterranean Cruise Registration

October 28-November 9, 2008

Please PRINT Clearly!

Legal Name w/middle initial (passenger #1) \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Your Email Address \_\_\_\_\_ Past Carnival Guest # \_\_\_\_\_  
Are you a US Citizen? \_\_\_\_\_ Date of Birth \_\_\_\_\_ Passport # \_\_\_\_\_  
Home City Airport? \_\_\_\_\_  
As this is a land – only tour, I understand I am responsible for my own flight arrangements.

Legal Name w/middle initial (passenger #2) \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Your Email Address \_\_\_\_\_ Past Carnival Guest # \_\_\_\_\_  
Are you a US Citizen? \_\_\_\_\_ Date of Birth \_\_\_\_\_ Passport # \_\_\_\_\_  
Home City Airport? \_\_\_\_\_  
As this is a land – only tour, I understand I am responsible for my own flight arrangements.

Optional Travel Insurance \$116/per person  Accept Insurance  Decline Insurance  
**(additional form required if insurance declined)**

**Deposit Payment: \$500 (Refundable for 7 days with written notice, then non-refundable except for cruise deposits)  
Insurance highly recommended.**

**Payment by Check: A personal check/cashier's check made payable to Deb RobertsTours is enclosed for a deposit of \$500.00 USD**

**Payment by Credit Card – credit card authorization form is attached (mandatory). I understand the charge is subject to a 3% fee.**

Credit Card Number (VISA or Master Card only) \_\_\_\_\_ EXP DATE: \_\_\_\_\_

Signature: \_\_\_\_\_

**It is my understanding that I will be responsible for the price of the tour as selected above, and if including air, an additional \$845.00 plus the international departure taxes which will be added before final payment is due, plus the single supplement if indicated as a choice above. I further understand that a minimum of twenty-five (25) people need to register for this portion of the cruise tour. Should these numbers not be attained by the final payment deadline, prices may be adjusted. Furthermore, I understand that final payment will only be accepted in the form of personal check to Deborah Roberts, or credit card subject to a 3% surcharge by the tour company, Picasso Tours. Final payment is due on or before August 15, 2008 without exception, or I am subject to a late fee and/or loss of space.**

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

I have read the terms and conditions associated with this tour, along with the full itinerary and pricing inclusions. By submitting this registration form, I understand and agree that 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, tour director, cruise line, 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. As such, unless it is due to illness or an emergency, 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 the quick pace on this tour and that all participants need to be in good physical condition in order to fully participate. 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. I will not authorize a charge-back from my credit card company for any portion of charges accessed for this tour. I understand that Deborah Roberts is not liable for my penalties or decision

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

\*\*\* Please mail or fax this reservation to: FAX: 714 5575259,  
Include optional excursion registration, credit card authorization and decline insurance form if applicable\*\*\*  
Mailing address: Deb Roberts' Textile Tours - 1841 Tahiti Dr. - Costa Mesa, CA 92626

## ONLY FOR USE WITH TOURS AND CRUISES ORGANIZED BY DEB ROBERTS

### CREDIT CARD HOLDER AUTHORIZATION FORM

For: \_\_\_\_\_  
(Name of tour or cruise)

Departing on: \_\_\_\_\_

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

Name as on card: \_\_\_\_\_

I, \_\_\_\_\_ authorize Deb Roberts or (specified tour/cruise  
company) \_\_\_\_\_

to charge the amount of \$ \_\_\_\_\_ for the following services: (circle one or both) deposit final payment  
to my: (circle one) VISA Master Card

Card # \_\_\_\_\_

Exact name on card: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code – CCV/CID# \_\_\_\_\_

VISA and MasterCard credit cards have a three-digit number. It is printed in the signature panel on the back of the card.  
The verification number is the last 3 digits on the right side of the panel.

**DEBIT CARD:** If your card has no authorization code, enter 0000 in the field above.

**Billing Address:** This must be the address to where your statement is mailed:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

COUNTRY if outside the USA \_\_\_\_\_

I/we are aware of any tour/cruise/trip cancellation policies and agree not to dispute or attempt to chargeback any of the  
above signed for and acknowledged charges.

Cardholder's 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)