

**REGISTRATION FOR MEDITERRANEAN EMPIRES
June 25-July 9, 2022 QUILT SEMINAR AT SEA**

~~~ PLEASE FILL OUT ONE FORM PER PERSON ~~~

PASSPORT Name: Dr/Mr/Mrs/Ms _____
First Middle Last

I prefer to be known as (for nametag): _____ Birthdate (required): _____

Address _____ City _____ State _____ Zip _____

Phone () _____ Alternate Phone () _____

Email address (*required* for Holland America's online check-in) _____

Passport valid 6 months past our return date is required!

I am traveling in the same cabin with: (first and last names) _____

If you're traveling alone: Would you like us to help find you a roommate? Yes No

Travel Preferences: I prefer: Interior Ocean-View Verandah Vista Suite Neptune Suite Other: _____

Do you have a cabin or category preference? _____

Do you prefer twin (two) beds or one double bed? Twins Double Have you sailed with Holland America previously? Yes No

Special needs on board (handicap cabin, special dietary requirements, etc): _____

I/We are celebrating a special occasion on board. Date during cruise to celebrate: _____ Circle one: Birthday Anniversary

Payment: This reservation is for _____ passengers. **Deposit is \$600 per person/\$100 non-refundable.**

____ Check: Enclosed is my check for \$ _____ PAYABLE TO AAA TRAVEL

____ Credit card: (Visa, Mastercard, American Express, Discover) Please charge \$ _____

Credit card number: _____ Exp Date _____

Name on the card: (PLEASE PRINT) _____ Security Code: _____

AAA Travel has my permission to charge my cruise and any other charges I authorize to my credit card.

(SIGNATURE AS IT APPEARS ON THE CARD) _____

Insurance: Your registration form cannot be processed unless the following section has been completed AND SIGNED. Please EITHER indicate that you are purchasing the insurance, or that you are declining.

____ I am purchasing trip cancellation/travel accident insurance from Travel Guard. Please charge my credit card above for the amount of \$ _____ **OR** I have enclosed my check in the amount of \$ _____

(If you have any questions please contact Amy)

____ I have been offered insurance to protect my travel investment and I am declining the purchase of this insurance. I, the undersigned, and my traveling companions listed below, whom I represent and have the authority to sign on behalf of, will not hold AAA Travel or its agents responsible for any losses or expenses incurred by me resulting from cancellation of my trip, accident, sickness, stolen or damaged baggage, any default of the cruise line, or resulting from any other travel supplier-related problem.

Signed _____ Other travelers for whom I am signing:

Printed Name _____

Class Choices:

____ I am taking the Quilting Workshops

____ I am not taking Quilting Workshops



Quilt Seminars at Sea
www.quiltcruises.com

MAIL OR FAX THIS COMPLETED FORM WITH PAYMENT TO:

**Quilt Seminars at Sea
Attn: Amy Ross
3605 132nd Ave SE
Bellevue, WA 98006
Fax: 1-425-460-9906**

**Questions? Email Amy at Amy@QuiltCruises.com
Or call toll free at 1-866-573-6351**