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**2017 Great Britain Sheep-to-Shawl Tour**

**Reservation Form**

***Please complete one reservation form per traveler***

Please carefully read all information to insure that we are able to process your reservation and get your vacation plans off to a great start! If you have questions while completing your reservation form, please e-mail [deb@fibergarden.com](mailto:deb@fibergarden.com) or phone 715-284-4590. We're here to help!

**Part One: Traveler Information**

First Name:  Middle: Last: 

***(Name must be listed EXACTLY as it appears on your passport!)***

Passport Number:  Passport Exp Date:  Birthdate: 

Mailing Address: City: 

State:  Zip:  Preferred Name (for name badge):

Phone:  Country of citizenship: 

E-mail:  Gender:  Male  Female

Special needs (dietary, oxygen, mobility, etc.): 

**Part Two: Lodging**

Select one:  Double occupancy ($4300)  Single Occupancy ($5399)

For double occupancy, please check one:

I know who I am rooming with. Name: 

I need a roommate.

If you are traveling solo and would like to share a room with another group member, please answer the following questions. We will help connect you with other solo travelers in our group to assist you in finding a roommate. The decision with whom to share a stateroom will be yours***. No guarantees can be made that solo travelers will find a compatible match to share a room with, nor can the Fiber Garden be responsible if a roommate cancels a reservation. Single occupancy rates will apply in these cases, or you may cancel and receive a refund according to the cancellation schedule.***

Are you a smoker?  No  Yes

Are you:  a "night owl"  "early to bed, early to rise"

Other information about yourself that will be important to know for room pairings?



**Part Three: Travel Insurance Waiver:**

Please carefully review the "Travel Insurance Brochure" located on the tour web page and give consideration to protecting your travel investment. If you elect to purchase insurance, ***you will be contacted by the Fiber Garden with an exact price quote*** ***prior to the policy being purchased for you***. Please select one below.

I would like a price quote to consider purchasing travel insurance now

I might like to purchase travel insurance at a later date. (Insurance can be purchased anytime up to 24 hours prior to your trip departure. Please take note of the "extra coverage" section on page one of the policy that outlines additional coverage provided when the policy is purchased within 15 days of the trip deposit being paid.) Contact the Fiber Garden when you are ready to receive a quote.)

I do not want to purchase travel insurance. (Should you change your mind later, just contact the Fiber Garden.)

**Part Four: Flight Information**

Your preferred airport: 

If there are other airports you are willing to fly out of, please list: 

Preferred airline(s): 

Airline frequent flyer numbers:

* Airline name:  FF Number: 
* Airline name:  FF Number: 
* Airline name:  FF Number: 

Aircraft seating preference: Window  Aisle  Middle

**Part Five: Fiber Interests and Comments**

Briefly describe your areas of interest in fiber arts (spinning, knitting, weaving, raising fiber animals, teaching, etc.):



Are you interested in participating in our shawl knit-a-long during the tour?  Yes  No

Comments, questions, or other information you'd like us to know:



**Part Six: Cancellation/Refund Schedule and Important Information**

***Trip Cancellations and Refunds.*** The following cancellation schedule applies to individuals who must cancel their trip reservation:

Land Cancellations:

* Cancellations prior to March 8, 2017: Full refund less a $50 administrative fee
* March 8 - April 12, 2017: Cancellation fee is $500
* April 13 – May 26, 2017: Cancellation fee is 25% of trip cost
* May 27 – June 8, 2017: Cancellation fee is 35% of trip cost
* June 7 - 15, 2017: Cancellation fee is 50% of trip cost
* June 16, 2017 (day of departure): Cancellation fee is 100% of trip cost

Air cancellations. Cancellation penalties will apply based on the policies of the airline your flight is booked with.

Minimum Group Number. Trip price is based on a minimum group size of 15. If this minimum is not reached, those registered *will have the option* to either cancel their reservation and receive a full refund (except insurance which is not refundable) or pay an additional $900 to travel with a smaller group.

***Local Government Taxes.*** All 2017 land prices include local government value added taxes (VAT) applicable on December 1, 2014. Any additional costs resulting from a tax increase prior to travel will result in an increase in trip price.

**Part Seven: Responsibility of Traveler**

Please acknowledge your responsibility to read and understand all information related to this trip. Questions should be directed to Deb at the Fiber Garden; [deb@fibergarden.com](mailto:deb@fibergarden.com) or phone 715-284-4590.

Signature of traveler:  Date: 

(You may type your signature in the box to acknowledge your acceptance of the terms.)

Please complete Part 8 on the next page with your credit card authorization and then return all four pages of this reservation form to Deb at the Fiber Garden. Be sure and keep a copy for your records.

Forms completed using the Word document can be saved on your computer and e-mailed as an attachment to [deb@fibergarden.com](mailto:deb@fibergarden.com).

Printed forms can be mailed to: Fiber Garden LLC, N5095 Old 54 Rd, Black River Falls WI 54615

If you'd prefer to fax your registration form, please e-mail or call for fax information.

Florida Seller of Travel Ref. No. ST15578 • California Seller of Travel No. 2090937-50 • Washington UBID No. 603189022

Iowa Registered Agency # 1202

**Part Eight: Credit Card Authorization Information** (*All payments must be made by credit card.)*

Travel Consultant Name:  Cardholder/Traveler Name: 

MasterCard  VISA  Discover American Express

Last four digits of card number:  Card expiration date: 

*(For security purposes, we will contact you by phone to get the remainder of your credit card information.)*

Names of travelers to be charged to this credit card:





Credit card charges you are authorizing the Fiber Garden to make on your behalf are as follows:

Upon receipt of this reservation form: $250 trip deposit

April 1, 2017: Balance of fee from part two above

Airfare for flights reserved on your behalf by the Fiber Garden (airfare quotes will be provided to you prior to tickets being purchased)

Travel insurance (if electing to purchase)

*Optional*: After the initial $250 deposit, if you would like to have monthly credit card payments made for payment towards your trip balance, please note your desired payment schedule below. Any remaining trip balance on April 1, 2017 will automatically be charged to your credit card on that date.

Amount to charge monthly:  Day of month to charge: 

Date to begin processing payments: 

I confirm the information I have provided is correct. I certify that I am an authorized credit card user for the above referenced credit card. I authorize Fiber Garden LLC to submit charges on my credit card for the amounts shown above. I agree to pay the total amount above according to the card issuer agreement.

Signature of cardholder:  Date: 

(as it appears on card) You may type your signature in the box to acknowledge your acceptance of the terms.