## **PANAMA CANAL CRUISE**

## **FEBRUARY 2 - 16, 2025**



| PERSONAL INFORMATION  | Please complete one f                  | orm per person. <u>PLEASE PRINT.</u>  |  |  |
|---|--|---|--|--|
| NAME:   |  |   |  |  |
|   | EXACTLY AS IT APPEARS ON YOUR PASSPORT |   |  |  |
| GENDER: (PLEASE CIRCLE) MAL                                   | E <b>FEMALE</b>                        | DATE OF BIRTH (MM/DD/YEAR):   |  |  |
| FAMILIAR/NICKNAME:  |  |   |  |  |
| Address:  |  |   |  |  |
| CITY/STATE/ZIP:   | EMAIL:                                 |   |  |  |
| HOME PHONE:   |  |   |  |  |
| TRAVEL DOCUMENTATION  |  |   |  |  |
| Passport #:   |  |   |  |  |
| ISSUING COUNTRY:  | <b>EXPIRATION DATE</b> (MM/DD/YEAR):   |   |  |  |
| NOT acceptable for this trip.  TSA PRE-CHECK #: (IF APPLICABI |  | nths (August 16, 2025) beyond the return date of the trip. A passport card is |  |  |
| CRUISE INFORMATION  |  |   |  |  |
| CABIN PREFERENCE (PLEASE SEL                                  | ECT ONE IN DOUBLE OR SI                | NGLE OCCUPANCY):  |  |  |
| DOUBLE OCCUPANCY: Mi  | ni-Suite (\$6,715)                     | Balcony (\$5,939)Ocean View (\$5,425) Inside (\$4,755)                        |  |  |
| SINGLE OCCUPANCY: Mi  | ni-Suite (\$9,969)                     | Balcony (\$8,429)Ocean View (\$7,405) Inside (\$6,065)                        |  |  |
| ROOMMATE'S NAME (IF APPLICA                                   | ABLE):                                 |   |  |  |
| BED CONFIGURATION:  | (2) TWIN BEDS                          | (1) QUEEN-SIZE BED  |  |  |
| DIETARY NEEDS: VEGE   | TARIAN GLUTE                           | EN FREE DIABETIC OTHER  |  |  |
| DINING PREFERENCE   | E: WITH GRO                            | DUP (TIME TBD) PERSONALIZED DINING  |  |  |
|   |  | ADE THROUGH THE PRINCESS APP WILL BE REQUIRED FOR EACH EVENING.               |  |  |
| CAPTAIN'S CIRCLE NUMBER:                                      |  |   |  |  |
| IF CELEBRATING AN ANNIVERSAL                                  | RY: (PLEASE NOTE THE DAY               | YOU WISH TO CELEBRATE)  |  |  |
| HEALTH NEEDS (PLEASE MARK AL                                  | L THAT APPLY) W                        | HEELCHAIR ASSISTANCE AIRPORT CPAP POC   |  |  |
| RESEF   | RVATION AND PAYMENT                    | INFORMATION BALANCE DUE:  |  |  |
| 51  |  | OCTOBER 1, 2024   |  |  |

Please complete a reservation form and submit it along with your \$400 per person deposit (\$800 per cabin, if in single occupancy) plus travel protection premium, if desired, to:

American State Bank, Attn: Loreen Marra 525 N. Main Avenue Sioux Center, IA 51250

Phone: 712-722-4846 Email: Loreen.Marra@ambankiowa.com

Please make checks payable to: American Spirit Club





## This policy must be read and signed before your tour reservation is accepted.

**CANCELLATION POLICY:** All payments are fully refundable for cancellations received by **October 1, 2024**. Although every effort will be made to refund passenger payments, cancellations received after this date will be subject to the penalties imposed by our suppliers including, but not exclusive to, the airline used to purchase non-refundable air tickets, as well as a \$150 cancellation fee. It is highly suggested that all travelers help protect their vacation investment by purchasing an optional travel protection plan. Your group representative can provide information on a plan offered by Travel Guard. Should the passenger purchase travel protection and need to cancel after **October 1, 2024**, a travel protection claim must be filed with Travel Guard. Please note that we encourage all travelers to purchase a plan at the time of initial trip deposit and that the premium is refundable for cancellations received before **October 1, 2024**.

☐ I ACCEPT the optional travel protection plan and have paid the premium. I agree American State Bank, American Bank and Cruises and Tours Worldwide are not liable for any losses, financial or otherwise.

| <b>Cabin Category</b> | Double Occupancy | Single Occupancy |
|-----------------------|------------------|------------------|
| Category MB           | \$484 per person | \$718 per person |
| Category <b>BB/BC</b> | \$428 per person | \$607 per person |
| Category <b>OC</b>    | \$391 per person | \$533 per person |
| Category IB           | \$342 per person | \$437 per person |

□ I DECLINE the optional travel protection plan and in doing so realize that I may lose all or part of my trip payment if I have to cancel after the cancellation date noted on the trip flier. I also realize that I will be 100% responsible for all expenses incurred due to cancelled or delayed flights; if I become sick, injured or die while on the trip; or if I must leave the tour to return home. I will also not have coverage for lost or damaged luggage, additional lodging or meals if delayed or for any unused portion of the tour. I agree American State Bank, American Bank and Cruises and Tours Worldwide are not liable for any losses, financial or otherwise.

Travel arrangements by Cruises and Tours Worldwide, St. Louis, MO: Cruises and Tours Worldwide acts only as an intermediary and agent in handling travel arrangements that are actually provided by other suppliers. This agency, therefore, shall not be responsible for breach of contract or any careless actions or omissions on the part of such suppliers, which result in any loss, damage, delay, or injury to tour participants. Cruises and Tours Worldwide may not be held responsible for losses or expenses due to sickness, lack of appropriate medical facilities or practitioners, public health issues, quarantine, weather, strikes, political instability, government restrictions, theft or other criminal acts, war, terrorism or acts of God. Cruises and Tours Worldwide retains the right to substitute accommodations or services of comparable quality if the advertised services become unavailable. Cruises and Tours Worldwide reserves the right to cancel this tour if the minimum number of tour participants is not met. The published price of this tour is based on rates available at the time of booking. Cruises and Tours Worldwide reserves the right to increase the cost of the tour, at any time, in the unlikely event that our tour suppliers impose price increases such as, but not limited to, fuel surcharges. Proof of such rate adjustments from our suppliers will be provided.

**INFECTIOUS DISEASE / COVID-19 WARNING:** The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and is reported to be contagious. The state of medical knowledge is evolving, and while the exact methods of spread and contraction are unknown, the virus is believed to spread from person-to-person contact and possibly by contact with contaminated surfaces and objects or in the air. Both vaccinated and unvaccinated people reportedly can be infected and show no symptoms and therefore spread the disease. Evidence has shown that infectious diseases including COVID-19 can cause serious and potentially life-threatening illness and even death, even among those who have been fully vaccinated. While governments and independent businesses have relaxed COVID-19 restrictions (masks, negative test, and/or proof of vaccination), these could be reimplemented at any time without notice.

ASSUMPTION OF RISK: I have read and understand the above warnings concerning COVID-19 and vaccine/mask requirements, and I voluntarily assume risks associated with exposure by virtue of my presence on this tour. Cruises and Tours Worldwide, American State Bank and American Bank cannot prevent you or anyone in your group from becoming exposed to, contracting, or spreading any illness, including COVID-19, while on tour. I understand that exposure to illnesses including COVID-19 may cause personal injury, illness, permanent disability, and/or death. I understand that if governments or private businesses reinstate their requirements of full vaccination against COVD-19 as a condition of entry and I am unable to provide proof, I may be denied access to some or all components of the tour without refund. If I test positive for COVID-19 while on tour, I understand that I may have to quarantine for an unspecified amount of time until I am cleared for travel by local authorities. I understand that I am responsible for the up-front costs associated with quarantine (lodging, meals, transportation, etc.), if necessary, and that travel protection may not reimburse me for all my out-of-pockets costs.

WAIVER OF LAWSUIT/LIABILITY: I, my family, my heirs, my legal representation, and my assigns hereby forever release and waive the right to sue Cruises and Tours Worldwide, American State Bank, American Bank, their parent companies, their owners, officers, directors, managers, officials, trustees, successors, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19, as well as any financial losses related to quarantine or my inability to access some/all components of a tour due to vaccination status requirements, testing requirements, and/or my inability or unwillingness to follow local protocols. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen, or unforeseen.

| Signature:    | Date: |
|---------------|-------|
|               |       |
| Printed Name: |       |