



A division of Cruise Vacations, Inc.

PLEASE READ THIS CAREFULLY

Waiver of Travel Protection

You are a valued client and we want to do everything possible to make your trip enjoyable and worry free. Because the unforeseen and unexpected can occur - before you leave or when you're away from home - we recommend the purchase of a travel protection plan. The range of coverage's and services available are provided for you via our website, www.InterlineRates.com (click on the **Travel Guard**® link.) Please take some time and read this information in detail. If you have any questions, please do not hesitate to call upon us.

NOTE: YOUR TRAVEL DOCUMENTS WILL NOT BE RELEASED UNTIL THIS FORM IS SIGNED AND RETURNED TO OUR OFFICE WITHIN 7 DAYS. YOU MAY FAX TO (303) 363-1107.

_____ **YES**, I want the **Travel Guard**® protection. I will enroll online at www.InterlineRates.com

_____ I would like to enroll over the phone, please have an agent call me.

_____ **NO**, I decline to purchase travel insurance. I have read and understand the information that was provided to me by **InterlineRates.com / Cruise Vacations, Inc.**, and know that I am responsible for any cancellation penalties and out-of-pocket expenses incurred. I will also make my own provisions in the event of an emergency while I am traveling.

Name

Invoice Number

Signature

Date

Mailing Address:

Cruise Vacations, Inc.
6795 E. Tennessee Ave.
Suite 160
Denver, CO 80224