

Celtic Quest 2018 Dublin Registration— 14-21 October (7 nights)

Your Name: _____ Roommate name or Assign me one: _____

Street Address or P.O. Box: _____

City, State, Postal Code, Country: _____

Telephone No.: _____

E-mail (necessary for communication): _____

TRIP COSTS FOR RESEARCHERS

___ Researcher (per person/double occupancy) US\$ 1750.00 _____
 ___ Researcher (per person/single occupancy) US\$ 2100.00 _____

ADDITIONAL NIGHTS AT BUSWELL'S *Request Dates ASAP if needed, limited availability*

___ Researcher (per person/double occupancy) cost / availability TBD _____
 Dates: _____
 ___ Researcher (per person/single occupancy) cost / availability TBD _____
 Requested Dates: _____

TRIP COSTS FOR NON-RESEARCHING COMPANIONS

___ Companion (per person/double occupancy) US\$ 1100.00 _____
 ___ Companion (per person/single occupancy) US\$ 1400.00 _____

ADDITIONAL NIGHTS AT BUSWELL'S *Request Dates ASAP if needed, limited availability*

___ Companion (per person/double occupancy) cost / availability TBD _____
 Dates: _____
 ___ Companion (per person/single occupancy) cost / availability TBD _____
 Dates: _____

Note: Incidentals at the hotel are the responsibility of the participant. **SUBTOTAL** _____

REGISTRATION DEPOSIT (\$500 PER PERSON REQUIRED) - _____

EARLY-BIRD DISCOUNT (for Researchers Only)
 Registrations must be postmarked by 15 March 2018 US\$ 100 discount - _____

BALANCE DUE _____

Method of Payment

___ Check / Money Order—Preferred (Canada: Payable in U.S. Dollars on U.S. Bank to Celtic Quest, LLC)
 ___ PayPal (online only through www.celticquest.net)

Please Check if applicable:
 I have a visual, hearing, or other physical impairment.

Mail to:
 Celtic Quest, LLC
 5237 Folkstone Dr.
 Troy, MI 48085-3222

Sign up online at:
<http://www.celticquest.net>

For more information:
 (248) 879-9352 or
dick.celticquest@gmail.com

First payment of \$500 is due upon registration. If Early-Bird Discount applies, the \$100 comes off the balance, not the deposit. For additional payment dates, see payment schedule.



If you cancel your trip on or before 30 June 2018, all monies paid will be refunded that exceed \$500. After 30 June and before 1 September 2018, all monies paid will be refunded that exceed 1/2 of the cost. On or after 1 September 2018, no monies will be refunded. A **MINIMUM OF 6 RESEARCHERS** is needed or the trip will be cancelled and all monies will be refunded. **ONLY THE FIRST 10 RESEARCHERS (WITH PAID DEPOSIT) WILL BE ACCEPTED!**

WAIVER AND ASSUMPTION OF RISK

The undersigned, _____, voluntarily makes and grants this Waiver and Assumption of Risk in favor of Celtic Quest, LLC, its principals and officers (collectively "Celtic Quest, LLC"), as partial consideration for the opportunity to engage in certain activities, events, and/or gatherings sponsored by Celtic Quest, LLC. I do hereby waive and release any and all claims whether in contract or of personal injury, bodily injury, property damage, damages, losses and/or death that may arise from the aforementioned.

I understand and recognize that there are certain risks, dangers, and perils connected with such activity, which I hereby acknowledge. I fully understand, and which I nevertheless accept, assume, and undertake. I further agree to use my best judgment in undertaking these activities and to faithfully adhere to all safety instructions and recommendations, whether oral or written. I hereby certify that I am a competent adult assuming these risks of my own free will, being under no compulsion or duress. This Waiver and Assumption of Risk is effective from 14 October to 21 October 2018, inclusive, and may not be revoked, altered, amended, rescinded, or voided without the express prior written consent of Celtic Quest, LLC.

 Signature

 Date