

CONTACT INFORMATION

Name (last) _____ Name (first) _____ M.I. _____ Gender: M F

Mailing address _____

City _____ State _____ Zip code _____

Social Security Number* _____ Date of birth (required) _____

(area code) Daytime phone _____ (area code) Evening phone _____ Email address _____

Emergency contact name _____ Emergency contact (area code) phone _____

I consent to release my address and/or phone number to fellow tour participants. Address: Yes No Phone: Yes No

FEES

Yes, I wish to register for the 2009 Spanish Language and Mexican Culture Travel-Study Tour, Feb. 15-28, 2009 (Reg #97043).

Tour fee deposit \$1200

Registration fee \$35

(Optional) Single-room supplement \$100

Total amount enclosed with this reservation: _____

PAYMENT

Check in U.S. funds made payable to the University of Washington. (Returned checks are subject to a \$25 service fee.)

Third-party payer: separate document (purchase order or letter of authorization to bill) must accompany this form.

VISA MasterCard

Card number _____ Expiration date _____

Name as it appears on card _____

Credit card billing address _____

PAYMENT continued

City State Zip code

Signature

HOST FAMILY ACCOMMODATIONS

- I wish to have a single room at an additional cost of \$100.
- Double-room occupancy:
 - I plan to share a room with (name): _____

NOTE: Please notify us **no later than January 15** if you would like to reserve a single room and/or any pre- or post-tour days.

PERSONAL INFORMATION

Food allergies or special dietary needs: _____

Physical challenges: _____

- Request handicap room

IMPORTANT INFORMATION

Mail completed form to:	Or fax form to:
UW Extension	206.685.9359
Registration Services	
PO Box 45010	
Seattle, WA 98145-0010	

Note: If paying by VISA or MasterCard, you may also register by phone at 206.897.8939 or 1.800.506.1325.

*For tax purposes, federal law requires the University to obtain your Social Security Number.

ACKNOWLEDGEMENT OF CONDITIONS

I have read the General Information (www.extension.washington.edu/ext/travel/mexico/default.asp#general) and agree to the conditions under which this tour will be operated, particularly those which apply to payments, cancellation, refunds, risks, flight and transportation arrangements, insurance and responsibility.
I acknowledge my voluntary participation in the activities of the tour I have chosen, understand this agreement to be a binding contract, and sign it of my free will.

Participant's signature (Parent or guardian must sign if participant is under 18 years of age) _____ Date _____