

DEPOSIT BY FRIDAY, DECEMBER 16, 2011 FOR EARLY BOOKING DISCOUNT SAVINGS OF \$500 PER COUPLE!

Professional Education Society
Ecuador & Galapagos Voyage ~ November 29—December 8, 2012
Optional Post-Tour to Peru & Machu Picchu ~ December 8—13, 2012

Mail or Fax Registration
Form To:

Professional Education Society, SINCE 1980
1855 S. Pueblo Blvd, Pueblo, CO 81005 Fax: 303-679-7384
For travel information, please call Stella at: 877-737-7005 ext 113
Or email: info@pestravel.com



Passenger name (as it appears on passport): _____ Travel companion name (as it appears on passport): _____
DOB: _____ DOB: _____

Occupation/Specialty: _____ Occupation/Specialty: _____

How would you like your names to read on a name badge?: _____ / _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () _____ Office: () _____ Cell: () _____

Email(s): _____

Air is not included in trip cost, if you would like assistance please indicate Air Gateway: _____

I plan to make my own air arrangements and will notify PES of my air schedule prior to purchase to verify appropriate arrival and departure times.

Are you a repeat PES Traveler?: _____ How did you hear about PES _____

Program Costs (per person):

Ecuador & Galapagos Voyage:	\$5,670 Double - Early Booking Price	\$6,765 Single - Early Booking Price
Peru & Machu Picchu:	\$3,445 Double	\$4,795 Single
Seminar Fees:	\$495 Professional	\$295 Non-Professional (Certificate of Attendance only)
International Airfare:	TBA - <i>airfare can be booked 11 months prior to departure</i>	

PLEASE RESERVE SPACE ON THE FOLLOWING:

- Ecuador & Galapagos Voyage Package : \$750 per person deposit for _____ persons \$ _____
- Peru & Machu Picchu Package: \$500 per person deposit for _____ persons \$ _____
- Professional Seminar Fee: for _____ person
- Non-Professional or Family Member Seminar Fee: for _____ persons

CHECK payable to "Professional Education Society" or **CREDIT CARD** (Visa ° MasterCard ° American Express) **TOTAL: \$** _____

Reservations are subject to availability of a first come, first served basis.

Authorization to use credit card: I accept the Terms and Conditions, Cancellation and Refund Policy and authorize Global Tracks to use my credit card for payment in the amount stated and for any additional charges on this credit card for Cruise Fares, Port Taxes, Seminar Fees, Insurance Premiums and Associated Costs.

Credit Card No: _____ Exp. Date: _____ CID: _____ Today's Date: _____

Name As it Appears on Card: _____ Signature: _____

Billing Address: _____

Travel Insurance is highly recommended: information and application will be sent with deposit confirmation

Final Payment is due August 31, 2012

Referrals:

If you have colleagues, friends or family who would be interested in joining future trips, please fill out the information below and we will add them to our mailing list. If your referral books a trip we will send you \$100 as a token of our appreciation

Name: _____ Email: _____

Mailing Address: _____



Global Tracks is the official travel agent for PES