ANCIENT EXPLORATIONS

Registration Form

Expedition to Machu Picchu

Including Lima, Cuzco and the Sacred Valley March 16-23, 2019

Each person in attendance must complete this form

Name		
Address		
email		
phone		
Personal Information	<u>1:</u>	
Gender		
Date of Birth		
Occupation		
Passport Information	<u>1:</u>	
Name on Passport		
Passport Number		
Expiration Date		
Country of Issue		

Do you have any allergies that Ancient Explorations should be aware of?

Do you have any medical conditions that Ancient Explorations should be aware of?

Disclaimer

3267 Bee Caves Rd Suite 107-161 Austin, TX 78746

For the purposes of this disclaimer "tours", "courses" and "study abroad programs" will be referred to as "the program".

Ancient Explorations, LLC (AE) will make every effort to provide a safe, accident free, enjoyable experience for all participants in the program. All ground transportation during the program will be provided by a licensed third-party independent contractor over whom AE has no control. Participants in the program assume all responsibility for hazards associated with ground transportation. The program takes place within exotic environments which can be hazardous. Participants assume all risks associated with these environments including but not limited to hazards posed by animals, insects, plants and disease. AE recommends that all participants consult with their physician with regard to vaccinations and/or other precautions that the physician may recommend prior to participating in the program. As with any outdoor activity which involves hiking and climbing, there are risks of injury for which participants assume all risk. The indigenous territories of native people have occasionally experienced periods of political unrest. Participants assume all risk associated with political unrest during the program. AE reserves the right to change or cancel any or all portions of the itinerary of the program, without refund, as a result of political unrest, inclement weather or any other reason beyond the control of AE. By checking the box below you acknowledge that you have read, and agree to, the terms of this disclaimer.

I have read and agree to the terms of the disclaimer (if registering a minor, I am the parent or legal guardian)				
□ Yes				
Name	Signature	 Date		
Fill out and return w	rith your program deposit to:			
Ancient Exploration	S			

Or scan and email to edbarnhart@ancientexploration.com