

# REGISTRATION FORM (one per passenger)

We strongly recommend registration via our online booking engine [www.centralholidayswest.com/booking](http://www.centralholidayswest.com/booking). Please use booking code: B002279

## SALT LAKE CHAMBER

## THE BEST OF PERU FEATURING LIMA, CUSCO AND AGUAS CALIENTES

OCTOBER 11-19, 2018

Reservations are on a first come first served basis.

Please sign up early to secure your place.

PLEASE PRINT, CIRCLE AND CHECK THE APPLICABLE INFORMATION - NAMES MUST BE LISTED AS THEY APPEAR ON YOUR PASSPORT

Please complete the form below (one per passenger) and e-mail it with a **clear copy of your passport** information page to Maria Loftis at [mloftis@slchamber.com](mailto:mloftis@slchamber.com).

Name: Mr. / Mrs. / Ms. : \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 First/Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Passport#: \_\_\_\_\_ Country of Issue: \_\_\_\_\_ Expiration date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Billing/Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Business/Cell Phone: \_\_\_\_\_

Traveling in a:  Single occupancy  Double/Twin occupancy with \_\_\_\_\_  
 First/Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

OPTIONAL TOURS	YES	NO	PRICE	OPTIONAL EXTENSION	YES	PRICE
THE SECRETS OF THE SACRED VALLEY	<input type="checkbox"/>	<input type="checkbox"/>	\$ 89.00	PUNO	<input type="checkbox"/>	\$ 699.00(Double)
			TOTAL \$		<input type="checkbox"/>	\$ 898.00 (Single)
						TOTAL \$

A minimum of 15 passengers are required for the optional tours and 20 passengers are required to operate the extension.

## TRAVEL PROTECTION PLAN:

We strongly recommend protecting your trip with our Optional Travel Protection Plan. The applicable Premium must be paid upon registration.

For a Full disclosure of coverage, please visit: [www.centralholidays.com/files/travel-protection.pdf](http://www.centralholidays.com/files/travel-protection.pdf).

Premium Rates are based on the total Tour Cost per person including taxes, optional tours and optional extension.

TOUR COST:	from \$3,501 to \$4,000	from \$4,001 to \$4,500	from \$4,501 to \$5,000	from \$5,001 to \$5,500
PREMIUM COST:	\$ 252	\$ 283	\$ 318	\$ 345

YES, I accept travel protection  NO, I decline travel protection (not recommended)

## PAYMENTS\*:

Total Trip Cost\*\*/Deposit: \$ \_\_\_\_\_ (Deposit of \$500 per person, plus Optional Tours and Optional Extensions are due at time of Registration.  
 Optional Tours Total: \$ \_\_\_\_\_ \*\* If you are registering within 90 Days of trip departure, Total Trip Cost is due at time of registration.)  
 Optional Extension Total: \$ \_\_\_\_\_  
 Travel Protection: \$ \_\_\_\_\_  
 Total (inc. Insurance) \$ \_\_\_\_\_

\*Final Payment is due 90 days prior to trip departure date.

Notes: \_\_\_\_\_

## PAYMENT METHODS:

CHECK:

Make checks payable to Central Holidays West and send to: Salt Lake Chamber – 175 East 400 South, Suite 600, Salt Lake City, UT 84111

CREDIT CARD:  AMERICAN EXPRESS  MASTERCARD  VISA  DISCOVER Name that appears on the card: \_\_\_\_\_

Credit Card# \_\_\_\_\_ Security code#: \_\_\_\_\_ Exp. date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## CANCELLATION POLICY:

Cancellations with more than 90 days prior to departure 10% of total cost per person (or a minimum of \$325 per person) is retained, between 89 and 46 days prior to departure 30% is retained, 45 and 31 days 50% is retained, 30 and 15 days 75% is retained, 14 days or less, or no show 100% of the package price is retained.

Note: A person becoming a single as a result of the roommate's cancellation must pay the single supplement.

I have read the schedule of activities for the Salt Lake Chamber – Best of Peru program – October 11-19, 2018 and accept the terms and conditions outlined on our website [www.centralholidayswest.com/terms-conditions](http://www.centralholidayswest.com/terms-conditions) and authorize \$ \_\_\_\_\_ to be charged to my card (including optional tours/extension and insurance premium if applicable).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

CST#211307450