

PROGRAM COSTS ~~Santa Yemaya Ministries~~, *Proyecto Palo Monte Religious Syncretism in Cuba*

Land/Air Arrangements:

\$2,200 - double occupancy (Airport departure taxes extra) **Single Room Supplement: \$50.00**

As a deposit and to reserve space, I/we have enclosed a check in the total amount for \$ _____ (\$500.00 per person), payable to Cuba Tours & Travel.

Name (s) 1 _____
2 _____

Address: _____

City: _____ State _____ Zip Code _____

Home Phone: () _____ Business Phone: () _____

Birth Date (s) 1 _____ 2 _____

Mother's Maiden Name: 1 _____ 2 _____

Gender (s) 1 _____ 2 _____

E-mail address _____

(Can we inform you of future programs? ____Y ____N)

Passport Information:

1 _____
Passport Number Place of Issue Date of Issue Expiration Date

2 _____
Passport Number Place of Issue Date of Issue Expiration Date

() I will be sharing a room with: _____

() I request a single supplement (additional cost of \$50)

() I would like a roommate if possible, but am willing to pay the single supplement if one can not be found

- By filling out this form and mailing in the deposit, I/we accept the following terms and conditions

FOLLOW UP MATERIALS WILL BE MAILED AFTER RECEIPT OF DEPOSIT
California Seller of Travel #2053349-40

