



RESERVATIONS FORM

If you failed sending the form by Internet, you can print and fill this document to later send it to the fax number (591-2) 241-3273. Please do not forget to read Conditions and to sign the form before sending it.

Personal Data

Full name*: Sex (F/M): Passport Number:

Date of birth (D/M/Y): / /

Country: Mailing address:

Email address:

Phone: Fax:

Occupation: Are you vegetarian (Y/N):

Dietary restrictions:

Brief explanation of your previous experience:

Insurance data: company, coverage, policy information, etc.

Medical Form

Are you physically active? (Y/N): Allergies:

Medical conditions:

Medication that you will be taken during the trip:

Emergency contact

Full name: Relationship:

Mailing address:

Email address:

Phone: Fax:

Services booked




Please refer to the trip's code or describe briefly the services booked:

Advance Payment Form

Advance payment amount: \$us

Bank transaction:

Credit card:

Credit Card Data:   

Card Number: Expiration date(m/y): /

Bank's name: Security code:

Name on card: Passport number:

Waiver and Release of Liability

I, *, have been informed and am aware that adventure travel can be dangerous and includes certain risks and dangers that are an integral part of the trips and travel conditions and I accept them as a part of the reason for my participation on this trip.

Having my application being accepted by ANDEAN SUMMITS, I hereby agree as follows :

- I release ANDEAN SUMMITS for all or any liability for any losses, damages or injuries or any claim or demand on account of any injury to my person or property.
- I agree that if I am injured or ill, ANDEAN SUMMITS may, at my cost, arrange or supply medical treatment, evacuation or any other emergency services on my behalf as ANDEAN SUMMITS seems necessary or appropriate for my safety and well being.
- I have read and agree to ANDEAN SUMMITS policies, stated under the terms and conditions.
- I am aware I should purchase insurance coverage

I further agree that I will not have any illegal drugs on my person or in my possession when partaking in any part of any ANDEAN SUMMITS trips.

I have read and understand all the terms of this contract and agree to it of my own free will and without any reservation.

By entering my full name into the Signature Field below, I agree that is accepted as my signature for this transaction.

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*

Client signature