



REGISTRATION FORM

To reserve space in a program, please fill out this form and return it with your \$500 non-refundable deposit. We cannot process your application until it is filled out completely, and until we receive your deposit. Make checks payable to: Estevez Travel. Contact us to find out other methods of payment. Send application and payment to: Estevez Travel, 23 NW 33rd Ct # 5, Gainesville, FL 32607. Tel: (352) 331-3934 • www.esteveztravel.com • email: cubaprogram@esteveztravel.com
* If it is necessary for you to cancel before the final payment deadline, the deposit can be transferred to another program within a six-month period.

Please, select from the following options the program/s you wish to register for:

International Conferences / Events Dates	Spanish Language and Cuban Culture program Dates	Full-time professional researchers Dates	Educational and Academic Program Dates
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First Name (as it appears on your passport)	M. Initial	Last Name	Mother maiden name	Nickname (as you prefer to be called)	Today's Date
Address		City	State		ZIP
Home Phone		Work Phone		Cell Phone	
Email			Facebook / Website (Optional)		
Major / Occupation		School/ Employer		Ethnicity (optional)	

Passport Information:

I am a citizen of	Passport #	Date of Expiration
Date of Birth	Place of Birth	Gender

Person(s) to Contact in an Emergency

Phone Number(s)	Relation
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Rate your Spanish language ability None Basic Intermediate Conversational Fluent

Accommodations:

Assign me a roommate I am / Non-Smoker I am / Smoker I wish to share a room with

I prefer a single room with the additional cost

What other Third World travel experience do you have?	Do you have any special dietary needs, medical conditions, or disabilities that may affect your participation on this program?	Briefly describe your expectations for this program.
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