

RESERVATION CONFIRMATION FORM (via website download)

Ancon Expeditions of Panama, Inc.
P.O. Box 0832-1509 (WTC), Panama, Republic of Panama
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Each traveler must complete this form (please be advised to state all special medical conditions, allergies, diseases, food diets), carefully read the "Limits on Ancon Expeditions of Panama's Responsibility", and sign it. Please return the completed form to your Sales Representative via E-mail (scanned attachment) or fax +(507) 264-3713. From the USA dial (011) prior to the area code and fax number.

Attention to:

(name of your sales representative, if applies)

Tour Name:	Tour Date:
Hotel in Panama City for pick up: <i>(if not booked with Ancon Expeditions)</i>	Hotel in Panama City for drop off: <i>(if not booked with Ancon Expeditions)</i>
Full Names of all Travelers: 1) 2) 3) 4)	Nationality: 1) 2) 3) 4)
Sex: Weight: 1) 2) 3) 4)	Date of Birth: 1) 2) 3) 4)
Passport Number and Expiration Date: 1) 2) 3) 4)	Special Requests/ Medical History/ Dietary Requirements: 1) 2) 3) 4)
Home Address:	Phone / Cell Home: Phone / Cell Panama:
E-mail:	Emergency Contact:



LIMITS ON ANCON EXPEDITIONS OF PANAMA'S RESPONSIBILITY

Acts of God and the Like

ANCON EXPEDITIONS OF PANAMA IS NOT LIABLE for acts of God, fire, acts of government or other authorities, wars, civil disturbances, riots, terrorist acts, strikes, thefts, pilferage, epidemics, quarantines, dangerous incidents at sea, land, and air travel, and OTHER SIMILAR ACTS OR INCIDENTS BEYOND ITS CONTROL.

Traveler's Representations

The traveler represents that neither he or she nor anyone traveling with him or her has any PHYSICAL OR OTHER CONDITION OR DISABILITY that would create a HAZARD TO HIMSELF OR HERSELF OR OTHERS participating on the tour.

Independent Suppliers

ANCONEXPEDITIONS OF PANAMÁ, INC. purchases transportation, hotel accommodations, restaurant services, and other services from various independent suppliers that are not subject to its control. ANCON EXPEDITIONS OF PANAMA CANNOT, THEREFORE, BE LIABLE FOR ANY PROPERTY DAMAGE, PERSONAL INJURY OR DEATH that may occur due to (1) any act or omission of such a supplier, or (2) defects in or failures of any aircraft, vessel, automotive vehicle, or other means of transportation that is not under its control.

Optional Activities That May Be Dangerous

Optional activities will be available at some of the places you will visit. SOME OF THESE ACTIVITIES CARRY WITH THEM THE INHERENT RISK OF SERIOUS PERSONAL INJURY. These activities include, but are not necessarily limited to: (a) scuba diving; (b) horseback riding; (c) canoe or kayaking; (d) white water rafting trips, among others. You should be aware that YOUR PERSONAL SAFETY CANNOT BE GUARANTEED. Should you elect to participate in such activities while you are on tour, you are, of course, free to do so. However, you must understand that such participation will be at your own risk and that ANCONEXPEDITIONS OF PANAMA ASSUMES NO RESPONSIBILITY FOR YOUR SAFETY.

Under these terms, travelers under the age of 18 are required to have the consent of the parent or guardian whether they are traveling together or not.

Applicable Law

This agreement shall be construed, interpreted, and enforced in accordance with, and shall be governed by, the laws of the Republic of Panama.

RESERVATION AND CANCELLATION POLICY

Reservations:

To confirm a reservation we must receive a 50% deposit at the time of booking a tour. The balance of the cost of the tour is due 30 days prior to the first day of the tour.

Cancellations:

Cancellations made with more than 30 days notice from the first day of the tour are subject to a full refund of the deposit. Cancellations made between 30 and 15 days prior to the first day of the tour are subject to a 50% refund of the total cost of the tour. Cancellations made within 15 days of the first day of the tour are not subject to refunds. All cancellation requests must be done in writing.

Payment of the tour cost constitutes acceptance of the "LIMITS OF ANCON EXPEDITIONS OF PANAMA'S RESPONSIBILITY" set out above.

Signature of Traveler 1: _____ Date: _____

Signature of Traveler 2: _____ Date: _____

Signature of Traveler 3: _____ Date: _____

Signature of Traveler 4: _____ Date: _____

