

RESERVATION FORM

Maggie Price Workshop in Italy • October 3-13, 2012

Please complete and sign this form and mail to: Maggie Price, P.O. Box 46107, Rio Rancho NM 87174-6107

ARTIST INFORMATION

			M	F
NAME (AS IT APPEARS ON PASSPORT)			CIRCLE ONE	
ADDRESS				
CITY	STATE	ZIP		
COUNTRY	PHONE			
PASSPORT NO.				
EMAIL ADDRESS				
EMERGENCY CONTACT				
EMERGENCY CONTACT				

NON-PAINTING COMPANION

			M	F
NAME (AS IT APPEARS ON PASSPORT)			CIRCLE ONE	
ADDRESS				
CITY	STATE	ZIP		
COUNTRY	PHONE			
PASSPORT NO.				
EMAIL ADDRESS				
EMERGENCY CONTACT				
EMERGENCY CONTACT				

ACCOMMODATIONS

Please provide the name of the person you wish to room with _____

or check here if you wish to be assigned a room-mate _____

(No single rooms are available; if you wish a private double room, the surcharge is \$2,500. Please check availability before registering.)

PAYMENT

Workshop package (see flyer for details): \$3,495 for artist; \$3,295 for non-painting companion sharing double room

Deposit: \$500 per person, due Jan. 1, 2012, or upon registration. All deposits are non-refundable.

Balance: 50% of the balance is due March 15; the final 50% of the balance is due July 15.

No payments are refundable unless Il Chioistro cancels the workshop.

Prices are in USD. Prices cover workshop package only, not airfare. See the flyer for other items not included.

PAYMENT ENCLOSED: ___ check enclosed for ___ person(s) in the amount of _____.

To pay by credit card, please call Maggie Price at 505-294-7752.

Please note: We are not responsible for expenses incurred in preparation for any trips (even cancelled trips), such as airline tickets, travel delays, flight cancellations or health problems. This workshop will be held regardless of world events. We recommend that you purchase travel insurance to cover cost of the trip and the workshop package.

RESPONSIBILITY CLAUSE

Il Chioistro, the Tuscan Renaissance Center, Residence Michelangiolo and/or Maggie Price, employees, affiliates, successors, or assigns (collectively referred to herein as Organizers) are not liable for any negligent or willful act or failure to act, of any person, third party or entity which is to, or provides goods or services including but not limited to: transportation companies, equipment suppliers, food service providers ect. I acknowledge that I am voluntarily participating in this trip with the knowledge of the inherent risks and dangers involved, including but not limited to: negligence on the part of Organizers, its employees, physical exertion, forces of nature, transportation failures, consumption of alcohol, risks with food or impure water, civil unrest, terrorism, criminal activity, wild or other animals, failure of equipment, accident or illness without means of evacuation, or availability of medical supplies or services or adequacy of medical attent once provided, and lost/stolen/or misplaced luggage or property. I hereby agree to be responsible for my own welfare and accept any and all risks of delay, unanticipated events, inconvenience, illness, injury, emotional trauma or death. I hereby release and discharge forever Organizers, and employees, from and against any and all liability arising from my participation in this trip. I agree that this release is legally binding upon me, all members of my family and all minors traveling with me, my and their heirs, successors, assigns, and legal representatives, it being my intention to release Organizers and employees, successors, affiliates, and assigns from any and all liability to the maximum extent by law. I acknowledge that to participate, I will require a legal passport, and that Organizers reserves the right to remove me or any participant it judges incapable of meeting the rigors of activities or who detracts from the enjoyment of the trip by others. I will follow all safety rules presented to me either written or oral by Organizers.

ARTIST SIGNATURE / DATE

COMPANION SIGNATURE / DATE