

REGISTRATION

Enclosed is my check or credit card no. for \$_____ (\$ 1,500 per person) as a deposit to hold_____ place(s) on **Expedition to Antarctica**, December 10-21, 2021, with The Skeptics Society. I understand that final payment is due ninety (90) days prior to departure and is payable by check or credit card.

Please make check payable to and mail with this registration form to:

Thalassa Journeys

8815 Conroy-Windermere Rd., Suite 406, Orlando, FL 32835

Phone Toll-Free: (866) 633-3611

AmEx Discover Visa MasterCard

No. _____

Exp. _____ 3- or 4-Digit Security Code _____

PLEASE SELECT STATEROOM CATEGORY IN ORDER OF PREFERENCE

1st choice

2nd choice

3rd choice

Double Occupancy

Single Occupancy

FIRST MIDDLE LAST (AS ON YOUR PASSPORT)

FIRST MIDDLE LAST (AS ON YOUR PASSPORT)

ADDRESS

Each participant must sign below: I/We have read the "General Information" section and agree to its terms.

CITY/STATE/ZIP

TELEPHONE (DAY)

(EVENING)

SIGNATURE

DATE

E-MAIL

SIGNATURE

DATE