

RETURN REGSITRATION FORM OR CALL TODAY— BOOK EARLY FOR BEST STATEROOM SELECTION!

Professional Education Society and Crystal Cruises Hellenic Escapade ~ June 18 - 25, 2010

Passenger name (as it appears on passport): _____

Travel companion name (as it appears on passport): _____

DOB: _____

DOB: _____

Occupation/Specialty: _____

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How would you like your names to read on a name badges?: _____ / _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: () _____ Office: () _____ Cell: () _____

Email(s): _____

Choice of Stateroom Category: _____

Bedding Style: Twins _____ Queen _____

Preferred Dining: Early Seating 6:15 p.m. _____ Late Seating 8:30 p.m. _____

Dining preferences are based on availability at the time of booking

Air Gateway: _____

I plan to make my own air arrangements and will notify PES of my air schedule prior to purchase to verify appropriate arrival and departure times.

Are you a Crystal Society member? If yes, Society Number: _____ Are you a repeat PES Traveler?: _____

Stateroom Rates* (per person)

Category	Published Rate	PES Rate	Single Rate
C	\$7,700	\$3,850	\$4,813
B	\$9,120	\$4,560	\$6,156
A	\$9,640	\$4,820	\$6,507
AA	\$10,840	\$5,225	\$7,838
PH	\$21,840	\$10,740	\$18,795
PS	\$23,225	\$13,060	\$26,120
CP	\$47,460	\$23,730	\$47,460

*Cruise rates include free air from major gateways.

Rates do not include Port, Handling, and Security Charges (\$240 per person)

Passports are required for travel.

Two Night Pre-Cruise Program: Classical Athens June 16 - 18, 2010

\$830 per person based on double occupancy; \$285 single supplement

Two Night Post-Cruise Program: Venetian Treasures June 25 - 27, 2010

\$1,050 per person based on double occupancy; \$640 single supplement

The Professional Education Society Symposium Fee:

\$395 Physician, dentist, nurse or health related professional
\$195 Non-professional or family member attending the Seminar.



Mail or Fax Registration Form To:

Professional Education Society

PO Box 1750

Evergreen, CO 80437

Tel: 877-737-7005 Fax: 303-679-7384

Email Kim at: pes@globaltracks.com

PLEASE RESERVE SPACE ON THE FOLLOWING:

- Cruise: 10% per person deposit for categories C - AA; 20% per person for categories PH - CP for _____ persons \$ _____
- Pre-Cruise Classical Athens: \$100 per person deposit for _____ persons \$ _____
- Post-Cruise Venetian Treasures: \$100 per person deposit for _____ persons \$ _____
- Professional Symposium Fee: \$50 per person deposit for _____ persons \$ _____
- Non-Professional or Family Member Symposium Fee: \$50 per person deposit for _____ persons \$ _____

CHECK payable to "Professional Education Society" or CREDIT CARD (Visa ° MasterCard ° American Express) TOTAL: \$ _____

Reservations are subject to availability of a first come, first served basis.

Authorization to use credit card: I accept the Terms and Conditions, Cancellation and Refund Policy and authorize Global Tracks and Crystal Cruises to use my credit card for payment in the amount stated and for any additional charges on this credit card for Cruise Fares, Port Taxes, Pre-and/or Post Programs, Seminar Fees, Insurance Premiums and Associated Costs.

Credit Card No: _____ Exp. Date: _____ Today's Date: _____

Name As it Appears on Card: _____ Signature: _____

Travel Insurance is highly recommended: information and application will be sent with deposit confirmation.

Final payment is due by April 2, 2010