NOTE: Return this form, your deposit, the UMBC Travel Agreement, International Travel Release, Emergency form and a legible photocopy of your passport to The Ancient Studies Department, 451 Performing Arts and Humanities Building, UMBC, 1000 Hilltop Circle, Baltimore, MD 21250 no later than October 16th, 2017.

Ancient Studies Registration Form
Greece 2018

Name (**EXACTLY as it appears on passport**) _____

Address (home and campus if applicable) _____

_____

E-mail Address _____

Telephone: Home _____

              Cell _____

Emergency contact when overseas:

              Name _____

              Relationship _____

              Phone _____

Rooming preference:

              Double occupancy _____   Single desired _____ ($335 additional fee)

              If would like to request a roommate, please put his or her name here:

              _____

Circle all that apply to you:

Declared ANCS Major	Declared ANCS Minor	UMBC Undergrad	UMBC Graduate Student	Friend of the ANCS Department
ANCS Alum	UMBC Alum	UMBC Faulty/Staff	Previous ANCS Trip Participant	

I intend to take ANCS 301: Ancient Civilizations for credit

        Yes   _____

        No   _____

        Maybe _____

Passport Number _____

Date of Birth _____

Place of Birth _____

Nationality _____

*Your passport must be valid.

    Payment Schedule (All checks payable to _UMBC_; Credit cards are now accepted, contact Domonique Pitts)

Total Cost of Trip $3,000 (+ $335 additional for single supplement)

October 16, 2017   Initial Deposit of $350 is due at the ANCS main office, 451 PAHB.
All checks must be dated **October 16, 2017**, even if you submit it earlier.
$25 of this deposit becomes non-refundable after your reservation is confirmed

December 12, 2017   Final payment of $3,000 is due
+ $335 if single room is desired (default is twin-share)
$350 becomes non-refundable

January 15, 2018   The full $3,000 (+all supplements) amount is non-refundable

    The Study Abroad Office requires that every traveler on the study tour purchase low-cost travel insurance through its office. The cost of this insurance is around $30.00 for the entire trip.

I have read this statement and also the materials on travel insurance and acknowledge that I have been offered the opportunity to purchase travel insurance.

    Signed: _____

    Date: _____

    Deposit Enclosed: _____