

**A \$200 per person per week deposit is required 7 days after booking. Make deposit payment online at: <http://surferparadise.com/page11.html> Bookings made 21 days or less to departure will HAVE 3 DAYS TO REMIT PAYMENT. BOOKING FORM MUST BE FAXED OR EMAILED [panamasurfcamp@gmail.com](mailto:panamasurfcamp@gmail.com)**

First name MARCO Last name CARREON  
760-632-8014, 800 846 2363 fax 952-674-8014

reservation dates: 6/4/11 - 6/10/11 Group name: CARREON/LORD ③  
Street Address 1335 CRESTVIEW AVE  
City SEAL BEACH State CA Zip code 90740  
Telephone- Home ( ) 562/519-1769 Work ( )  
e-mail: sbmarco187@HOTMAIL.COM

Passport number 405336868 (if you can't find your number, write "pending" and send to me anyway) Expiration date 07/13/15  
Date of issue 07/14/05 Place of issue CA  
Date of birth 05/15/1987 Nationality USA Occupation

Next of kin to be contacted in case of emergency VICKY CARREON  
Address 1335 CRESTVIEW AVE How did you hear about us?  
SEAL BEACH, CA  
Telephone- Home ( ) 562/598-0948 Work ( )

**IMPORTANT NOTICE**

By my signature, I acknowledge and confirm that I have read, understand and agree to all booking conditions set forth.

I am aware that a Panama surf trip, in addition to usual and inherent risks, has certain additional risks and dangers which may include: physical exertion for which I may not be prepared; remoteness to normal medical services; weather extremes subject to sudden, unexpected change; and evacuation difficulties if I am disabled.

I accept all inherent risks of the proposed trip and possibility of personal injury, death, property damage or loss resulting therefrom.

In entering into this agreement, I am not relying on any oral, written, or visual representations or statements by Morro Negro, S.A., its agents or staff, or any other inducement or coercion to go on the trip, hence, only of my own free will.

Signed X [Signature] Dated 5-10-11 (Parent or legal guardian must sign for all persons under the age of 18)

**BOOKING TERMS & CONDITIONS**

# BOOKING FORM PRIVATE PANAMA SURF CAMP

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First name LOUIS Last name CARREON  
760-632-8014, 800 846 2363 fax 952-674-8014

reservation dates: 6/4/11 - 6/11/11 Group name: CARREON/LORD ③  
Street Address 8972 SHOREHAM DRIVE  
City WEST HOLLYWOOD State CA Zip code 90069  
Telephone- Home ( ) 310/500-8223 Work ( )  
e-mail: LOUIS CARREON@THELEADINGCIRCLE.COM

Passport number PENDING (if you can't find your number, write "pending" and send to me anyway) Expiration date

Date of issue \_\_\_\_\_ Place of issue \_\_\_\_\_  
Date of birth 02/09/1977 Nationality \_\_\_\_\_ Occupation \_\_\_\_\_

Next of kin to be contacted in case of emergency VICKY CARREON (562) 598-0948  
Address 1335 CRESTVIEW AVE. SEAL BEACH CA How did you hear about us?  
Telephone- Home ( ) 562/598-0948 Work ( )

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