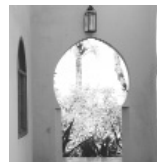


# PEGGY MARKEL'S

CULINARY ADVENTURES

CONNECTING CUISINE, CULTURE & LIFESTYLE



[www.peggymarkel.com](http://www.peggymarkel.com) • 1-800-988-2851

For more detailed information on all our programs, such as itineraries, reviews, FAQ's, please visit [www.peggymarkel.com](http://www.peggymarkel.com), or call us at 1-800-988-2851.

## Peggy Markel's Culinary Adventures – Application Form 2008

In order to secure your place in the course, please follow the steps (1) through (5) below. Sign form, and mail with payment to: Peggy Markel's Culinary Adventures, P.O. Box 54, Boulder, CO 80306.

Registration form may be used to register one person, or two persons with identical contact information. If two registrants use one form, BOTH applicants MUST sign the release form on the back. Please note: if second registrant's contact information is different, please use a separate registration. (If you need additional registration forms, please call us at 888-etc etc. and we can fax or mail them to you, or you can download them from our website at: [www.peggymarkel.com/programs.html](http://www.peggymarkel.com/programs.html))

Prices include accommodations, three meals per day, all cooking instruction, tours, tastings, ground transportation and transfers during the program. Airfare is not included. Please inquire about rates for spouses and guests who choose not to participate in the cooking classes. Prices subject to change without notice.

### (1) TELL US YOUR CONTACT INFORMATION

First Registrant's Name \_\_\_\_\_ Second Registrant's Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Who To Contact In Case Of Emergency \_\_\_\_\_ Phone \_\_\_\_\_

### (2) CHOOSE YOUR PROGRAM DATES, ROOM TYPE AND PRICE

#### Tuscany: La Cucina al Focolare

Choose Program Dates:

- May 10-17, 2008
- September 27-October 4, 2008
- October 4-11, 2008

Choose Your Room Type / Price per person:

- Single Occupancy \$4940
- Double Occupancy \$4595
- Triple Occupancy \$4250 (availability limited)

#### Morocco – A Feast for the Senses

Choose Program Dates:

- April 2–11, 2008
- September 10–19, 2008
- November 12–20, 2008

Choose Your Room Type / Price per person:

- Single Occupancy \$4940
- Double Occupancy \$4595

#### Sicily – A Different Italy

Choose Program Dates:

- May 2-10, 2008
- October 23-31, 2008

Choose Your Room Type / Price per person:

- Single Occupancy \$5370
- Double Occupancy \$4995

#### Elba – Rustic Tuscan Island Cooking

Choose Program Dates:

- June 1-6, 2008

Choose Your Room Type / Price per person:

- Single Occupancy \$3595
- Double Occupancy \$3295

#### Amalfi - Savoring and Sailing Amalfi

Choose Program Dates:

- June 13-20, 2008
- June 21-28, 2008

Choose Your Room Type / Price per person:

- Single Occupancy \$3800
- Double Occupancy \$3500
- Youth(12-18) \$3000/per Number\_\_\_\_\_

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**(3) Please tell us a little about yourself?**

**What is one thing you would wish to gain from this adventure?**

**What attracted you to Peggy Markel's Culinary Adventures?**

**Where did you hear about us?**

**(4) PAYMENT METHOD**

How Many Registering: Total Amount Due: \$ \_\_\_\_\_

1    2

Deposit \$ \_\_\_\_\_ (\$1000 per registrant)    Note: Balance due 60 days prior to program

Payment in Full \$ \_\_\_\_\_

*Payment with Check*

Check Enclosed # \_\_\_\_\_ (Please make payable to: Peggy Markel's Culinary Adventures)

*Payment with Credit Card*

MC    VISA    AMEX    ACCT. NO. \_\_\_\_\_ EXP. DATE \_\_\_\_\_ 3-DIGIT "V" CODE \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Billing Address for Credit Card \_\_\_\_\_

Signature \_\_\_\_\_

**(5) CAREFULLY READ OUR POLICIES AND SIGN RELEASE FORM**

Prices include accommodations, three meals per day, all cooking instruction, tours, tastings, ground transportation and transfers during the program. Airfare is not included. Please inquire about rates for spouses and guests who choose not to participate in the cooking classes. Prices subject to change without notice.

CANCELLATIONS & REFUNDS: A \$1000 per person non-refundable deposit is required to reserve a space in the course. Balance is due 60 days prior to departure. For cancellations 61 days or more prior to departure, fees paid are refunded less the \$1000 deposit. Cancellations made 60 days or less prior to departure will result in the loss of all monies received. Exceptions to this cancellation policy cannot be made for any reason, including personal emergencies. There is no refund for leaving a program early or arriving late. As a courtesy, PMCA will honor your deposit and/or fees paid for up to one year when applied to another program.

The school reserves the right to cancel any program prior to its start, in which case all monies will be refunded.

ITINERARY: Peggy Markel's Culinary Adventures' has the right to make partial changes to the stated itinerary. We will do our best to keep changes to a minimum.

PHOTO RELEASE: Peggy Markel's Culinary Adventures' photographs class activities for use in brochure/publicity. Please notify us if we are not free to use photographs of you.

WAIVER & EMERGENCY INFORMATION: Please remember to include with your deposit the signed waiver and emergency information.

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**RELEASE AND ASSUMPTION OF RISK**

I hereby acknowledge that I have voluntarily applied (the "Applicant") to Soul Kitchen, Inc., a Colorado corporation (dba Peggy Markel's Culinary Adventures) (the "School") and that the School relies in part on others to provide cooking instruction, overnight accommodations, personal tours and transportation to and from such tours. The School, while exercising reasonable care in selecting such premises and independent contractors, does not guarantee without limitation their suitability or performance. In the event a lessor, independent contractor or contractors fail to provide or perform in a manner which materially diminishes the services or accommodations provided the Applicant, the School's liability shall be limited to refunding an amount to the Applicant from the fee paid which approximates the percentage of the School's program which has been compromised or lost.

Except as provided above, I further herein acknowledge and agree to release, absolve, indemnify and hold harmless the School, its organizers, sponsors, shareholders, and employees from any injury or loss caused by or resulting from the leased accommodations or employment of any and all independent contractors (the "Agreement"), unless such injury or loss resulted from the gross negligence of the School in selecting such premises or employing such party(s). This agreement shall also serve as a release and assumption of risk from my heirs, executors, administrators, and all members of my family.

I have carefully read this Agreement, understand that I am releasing certain legal rights that I otherwise have and I enter into this Agreement freely and voluntarily. I understand the School, in accepting my application to attend, does so based on this representation.

IN WITNESS WHEREOF, this Release and Assumption of Risk is executed and presented to the School on \_\_\_\_\_, 20\_\_.

By: \_\_\_\_\_  
(Applicant)

\_\_\_\_\_  
(Applicant)

We strongly recommend you purchase travel insurance.

- Yes, I choose to purchase travel insurance. Please contact our travel services for pricing.
- No, I decline to purchase travel insurance and I am assuming any financial loss associated with my travel plans.

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**(6) RETURN SIGNED FORM WITH PAYMENT TO OUR OFFICE**

*Mail to:*

Peggy Markel's Culinary Adventures  
P.O. Box 54  
Boulder, CO 80306

*Or Fax to:*

303-440-8598

**Questions? Contact us at:**

Phone: 1-800-988-2851 or 303-413-1289 Fax: 303-440-8598  
Website: [www.peggymarkel.com](http://www.peggymarkel.com) E-mail: [info@peggymarkel.com](mailto:info@peggymarkel.com)

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