



REGISTRATION FORM ~ THE HOLY LAND with Fr. Robert Fitzpatrick ~ Oct 16-27, 2017

Name (as printed on passport): _____

Name as you would like to be addressed and on your name tag: _____

Date of Birth (MM/DD/YY): _____ Gender: Male ___ Female ___

State of Birth: _____

Passport Number: _____

Expiration Date (MM/DD/YY): _____

Address: _____

City/State/Zip Code: _____

Home Phone: _____

Cell Phone: _____

E-mail: _____

Name, phone number and relationship of EMERGENCY contact person while you are abroad: _____

Any dietary restrictions: _____

Any medical conditions we should know about: _____

Nationality: _____ (USA, Spain, etc)

Frequent Flyer number and airline: _____

I wish to room with*: _____

I want a private room: _____ (add single supplement of \$500)

**I understand that if I don't have a roommate, I am responsible for the single supplement*

Travel Protection: JeriCo Christian Journeys recommends that you purchase a travel protection plan that offers Trip Cancellation/Trip Interruption, Emergency Medical and Emergency Evacuation/Repatriation, Trip Delay, and Baggage Delay. 4

Group Travel Protection Per Person: Double (\$397) yes ___ Single (\$472) yes ___ Decline: ___
(this is in addition to trip price) Signature _____

Travel Protection will be in addition to the trip cost and is due at time of deposit. A minimum of 10 people must purchase travel protection to guarantee group pricing. (In general, health care you receive while traveling outside the U.S. is not covered by Medicare).

*You may request a copy of the Description of Coverage, prior to purchase, which includes the terms, conditions, limitations and exclusions. This plan provides insurance coverage for your trip that applies only during the covered trip. You may have coverage from other sources that provides you with similar benefits but may be subject to different restrictions depending upon your other coverage. You may wish to compare the terms of this policy with your existing life, health, home and automobile policies. If you have any questions about your current coverage, call your insurer, insurance agent or broker. The purchase of this plan is not required in order to purchase any other travel product or service offered to you by your travel retailer".

A PASSPORT IS REQUIRED FOR THIS TRIP. A copy of your passport must be submitted with this registration form. Passport must be valid for 6 months after return date. If you do not have a passport but have applied for one, include that information with this form.