

**REGISTRATION FORM  
THE HOLYLAND WITH PASTOR RICH AND CHERYL**

Complete & send to: Holyland Trip, 33817 Violet Lantern, Dana Point, CA 92629  
with \$750 deposit per person,

Make check or money orders payable to **Holyland Trip**  
(to pay by CC or PayPal, email [cheryl@theholylandwithrichandcheryl.com](mailto:cheryl@theholylandwithrichandcheryl.com))

*(Please use a separate Registration Form for each person registering)*

*For information or questions call 949-234-9844*

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**Please Register Me For (Check All That Apply)**

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- Holyland Trip TBA Per Person  
*(Price is based on double occupancy)*  
*(We will try to match you with a roommate, if unable to do so, there will be an additional charge)*
- LAND ONLY TBA Per Person  
*(I will make my own air travel arrangements to & from Tel Aviv as stated in the Tour Agreement)*
- I prefer a single room *(additional charge)* TBA

Final Payment Due Date: 90 days prior to Departure

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PASSPORT NAME (make sure this is the exact name on your passport)

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Address

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City

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State

---

Zip

---

Birthdate

Male

Female

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Phone#

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Email

My roommate's name is:

My name preference for my name tag is:

- I prefer trip information by email       I prefer trip information by regular mail

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I have read the Tour Agreement, and I understand the refund and cancellation policy for The Holyland With Pastor Rich And Cheryl Tour, and I understand that the above amounts do not include travel insurance and have been advised to obtain my own travel insurance.

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Signature

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**Name on Passport**

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**Passport Number**

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**Date of Birth**

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**Place of Birth**

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**Date of Issue**

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**Date of Expiration**

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**Country of Issue**