

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, a 3% is required, email cheryl@theholylandwithrichandcheryl.com)
(Please use a separate Registration Form for each person registering)
For information or questions call 949-234-9844

Please Register Me For (Check All That Apply)

- Holyland Trip (6/4—6/16, 2019) \$4769 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 \$3498 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)* \$1530
(We will try to match you with a roommate, if unable to do so, this will be the additional charge)
- Petra Extension (6/15—6/18, 2019) \$995 Per Person
(Price based on a minimum of 10 participants, if less there will be an additional charge)

Final Payment Due Date: February 4th, 2019

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

Address

City

State

Zip

Birthdate

Male

Female

Phone#

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
-

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.

Signature

**PASSPORT FORM
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Name on Passport

Passport Number

Date of Birth

Place of Birth

Date of Issue

Date of Expiration

Country of Issue