

REGISTRATION FORM

Holy Land Pilgrimage**October 14 – 23, 2024****PERSONAL INFORMATION**Name (*exactly* as printed on passport) _____

Name (as you want to be called) _____

Nationality: USA Other (specify): _____**PASSPORT INFORMATION (dates exactly as formatted on passport)**

Passport No:
Date of Issue:
Date of Expiration:
Date of Birth:

ADDRESS AND PHONE NUMBERS

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Landline Work Phone: _____ Cell Landline

Email Address: _____

If you do not have an e-mail address, please provide the e-mail address of a relative or friend who can reach you with critical information about this pilgrimage. Thank you!

EMERGENCY CONTACT INFORMATION

Emergency Contact Name:
Relationship to you:
Home Phone:
Work Phone:
E-mail Address:

ACCOMMODATIONS

Your preferred roommate: _____

Your preferred bed configuration: 2 singles arranged as

matrimonial arranged as

If possible I would like to be assigned a roommate: Yes No I will be rooming alone at additional charge as noted in the brochure. Yes No **TRANSPORTATION**

From where will you be departing? (circle one) Indianapolis Cincinnati Other _____

If other, do you need help with a connecting flight? Yes No **SPECIAL NEEDS**

Describe your special dietary needs (e.g. vegetarian, diabetic, etc.)

Do you have any physical limitations or chronic illness? (asthma, diabetes)?

Do you have any other special needs? Do you require any special equipment? (CPAP device, refrigerator for insulin or other medication, etc.)

DEPOSITMy deposit of \$250.00 is enclosed Yes No

Enclosed is an additional sum of \$ _____

Please review the pilgrimage brochure for itinerary details, explanation of cancellation policy, and final deposit information. All pilgrims will be contacted by e-mail or letter once the registration form and deposit are received.

I have read the terms and conditions in the brochure and accept the responsibilities stated.

Signature _____ Date _____

Send completed form, deposit and a photocopy of the identification page of your passport to:

Kairos Travel
 4812 N Park Avenue
 Indianapolis, IN 46205
 jandtzander@gmail.com • 317-445-5954