

ISRAEL 2023

Registration Form

PLEASE INCLUDE COPY OF PASSPORT(S) WITH THIS REGISTRATION FORM

Pastor Matthew Cutter March 12-21, 2023
Mail Registration Form and Deposit to: World Pilgrim Tours
2462 Bancroft Way • Buford, GA 30519

Name:	Date of birth:	Male Female:
Passport #	Issue date:	: Exp date:
Address:		
City:	State:	Zip:
Telephone #: (H) Email:	(C):	
l would like to share a room w	vith:	
Per Person sharing twin-bedd	led room, out of New York, NY.	\$3,995.00 x \$
Single room supplement \$ 78	0 \$	
Departure taxes and fuel surc	ges and gratuities included in harges may or may not increa orne by the passenger, even if	se at the time of ticketing
Total Charges: \$		
\$2000 per person due on or b	· ·	e space.
Balance due on or before Feb		to:

Your signature denotes your acceptance of the terms and conditions set forth in the brochure. Please make all checks payable to World Pilgrim Tours, Inc., and mail to the address above. (Credit cards not accepted) Inquiries should be directed to World Pilgrim Tours, Inc at (800) 438-8281. CANCELLATION POLICY: No cancellation fee if cancelled up to 60 days of departure except an administrative fee of \$350 per person. 59 – 45 days of departure, a cancellation fee of \$1000 per person; 44 – day of departure, acancellation fee of 100% of the tour cost per person. TRAVEL INSURANCE IS HIGHLY RECOMMENDED. Please ask for forms.