

Holy Land Pilgrimage 2009: Registration and Payment Information

To register for the Pilgrimage, please complete the registration form and submit it together with the \$750.00 non-refundable deposit by October 1, 2008. Please make cheques payable to Sally French.

The total cost for the pilgrimage is \$6250.00 Canadian, paid as follows:

Non-refundable deposit, due on application:	\$750.00
First payment, due November 1, 2008	\$3000.00
Second payment, due December 1, 2008	\$2500.00

The cost includes travel from Edmonton (all flights, buses, transfers, and boats; not including camel ride up Mount Sinai), accommodations (double occupancy, as described), all admissions and guiding costs for visits included in the itinerary, and most meals (as outlined in the itinerary; not including beverages). The cost does not include your medical insurance, local tips, travel visas, personal expenses, and other items as listed above. Please see the detailed brochure for further information.

The cost for the single supplement is \$800.00, payable on registration. In the event that you wish to share a room but do not have a roommate preference, we will attempt to match you with another single person of the same sex. If there is no match for you, you may be asked to pay the single supplement.

Should you have to withdraw from the pilgrimage after making some of the payments but before the trip takes place, the penalty will include the non-refundable \$750.00 deposit, and, after November 1, 2008, an additional \$2000.00 (to cover the costs of your airfare). After January 1, 2009, the trip is non-refundable as the monies will have already been sent to our Middle Eastern partners and they do not issue refunds.

Please note that there are a limited number of spaces on this pilgrimage. They will be assigned on a "first come, first served" basis.

To register, please submit your completed registration form and deposit to:
Sally French
141 Paddock Street,
Watertown, New York
13601 USA

Thank you for your participation in the Following Christ and the First Christians (Holy Land) Pilgrimage. This completed registration form, together with your \$750.00 non-refundable deposit, will reserve your place on the pilgrimage. By applying, you acknowledge and accept that the itinerary may be subject to small changes as necessary. You also acknowledge that the pilgrimage fees cover airfare, plus all land travel, accommodation, most meals, admissions and guiding expenses, and that the participant is responsible for any other costs, including those listed in the schedule (primarily visas, medical insurance, tips, and personal expenses). Finally, by signing this form, you acknowledge that, as with any travel, there are certain risks entailed in this pilgrimage, and you absolve the leadership of any responsibility associated with your decision to participate in the Following Christ and the First Christians (Holy Land) Pilgrimage.

We look forward to journeying with you on our pilgrimage.

Please complete the following statement:

I, _____, wish to participate in the Following Christ and the First Christians (Holy Land) Pilgrimage, Monday February 2, 2009 – Saturday, February 21, 2009.

Signature: _____

Date: _____

Please list two emergency contacts:

Name: _____ Relationship: _____

Telephone: _____

Name: _____ Relationship: _____

Telephone: _____

In the event of an emergency, does anyone have the legal authority to make decisions on your behalf? If so, who? _____

Do you have a preference for a roommate? _____

Do you smoke? Yes No (please circle)

For an additional charge, would you prefer a single room? Yes No

This pilgrimage includes a night in the Wilderness, camping in the Sinai Desert. Sleeping bags will be provided, and it is truly a wonderful experience. However, we will make alternate arrangements should any pilgrims feel that they are unable or unwilling to participate in this portion of the trip. Would you prefer that we make alternate arrangements for you for this night?

Yes, I would prefer to stay in a hotel

No, I wish to participate in the Wilderness experience

Maybe...I am not yet certain

(please circle one)

Following Christ and the First Christians: A Holy Land Pilgrimage
February 2 – 21 2009
Registration Form

Contact Information:

Name: _____

Address: _____

Telephone: _____ Email: _____

Personal Information:

Birthdate: _____ Place of Birth: _____

Do you have any chronic medical conditions? (please list)

Do you have any allergies? (please list)

Are you currently taking any medications? (please list)

Do you have any special dietary requirements? (please note that we may not be able to accommodate all requests, but we will try)

Passport Information:

Name, *as printed in your passport*: _____

Passport Number: _____ Country of Issue: _____

Date of Issue: _____ Place of Issue: _____

Expiry Date: _____