

Single Room Supplement: Yes ☐ No ☐

# TRINITY BAPTIST CHURCH BIBLICAL JOURNEY TO ISRAEL APRIL 30 - MAY 9, 2019 / LED BY PASTOR GREG DAVIDSON

| IST PASSENGER -             | (PLEASE PRINT NAME AS IS APPL | ARS IN YOUR PASSPORT)              |  |  |  |
|-----------------------------|-------------------------------|------------------------------------|--|--|--|
| First:                      | Middle:                       | Last:                              |  |  |  |
| Email:                      |                               | Phone: _()                         |  |  |  |
| Passport #:                 | Issue Date:                   | // Exp. Date://                    |  |  |  |
| Place of Issue:             |                               | No passport (I applied for one): □ |  |  |  |
| Date of Birth:              | _// Nationality:              | Gender: Male 🛭 Female 🗖            |  |  |  |
| Address:                    |                               | City:                              |  |  |  |
| State:                      | Zip Code:                     |                                    |  |  |  |
|                             |                               |                                    |  |  |  |
| 2 <sup>ND</sup> PASSENGER   |                               |                                    |  |  |  |
|                             |                               | Last:                              |  |  |  |
| Email:                      |                               | Phone: _()                         |  |  |  |
| •                           |                               | // Exp. Date://                    |  |  |  |
| Place of Issue:             |                               | No passport (I applied for one): □ |  |  |  |
| Date of Birth:              | // Nationality:               | Gender: Male □ Female □            |  |  |  |
| Address:                    |                               | City:                              |  |  |  |
| State:                      | Zip Code:                     |                                    |  |  |  |
| 3 <sup>RD</sup> PASSENGER   |                               |                                    |  |  |  |
|                             | Middle                        | Lacti                              |  |  |  |
|                             |                               | Last:                              |  |  |  |
|                             |                               | Phone: _()                         |  |  |  |
|                             |                               | // Exp. Date://                    |  |  |  |
|                             |                               | No passport (I applied for one): □ |  |  |  |
|                             |                               | Gender: Male 🗆 Female 🗅            |  |  |  |
|                             |                               | City:                              |  |  |  |
|                             | Zip Code:                     |                                    |  |  |  |
| ACCOMMODATION               | ONS                           |                                    |  |  |  |
| Sharing a double room with: |                               |                                    |  |  |  |

Travel Insurance: Yes □ No □



## AIR AND LAND TOUR PRICE

# AIR AND LAND PACKAGE FROM SAN FRANCISCO, CA

\$3900 All Taxes Included (Per Person in Double Occupancy)

Rates are Based on a minimum of 44 travelers / Single Room Supplement - \$875

## PAYMENT DETAILS

- A \$500 per person tour deposit is due upon registration, no later than **Friday December 28**, **2018**
- Final payment is due no later than **Friday February 22, 2019**
- For more information please contact: Mr. William Rawlinson @ email brawlinson@comcast.net

#### **PAYMENT**

| * For credit card payments (final | l payment only) ple   | ase complete the below | credit card information:      |
|-----------------------------------|-----------------------|------------------------|-------------------------------|
| Cardholder Name (AS IT APPEA      | ARS ON CREDIT CAR     | RD):                   |                               |
| Credit Card Number:               |                       |                        |                               |
| Expiration Date: /                |                       |                        |                               |
| CVV: (3 or 4 digits on the back o | or front of the cred  | it card):              | 1234567890 (234)              |
| Please note: a 3% handling fee w  | ill be applied for po | ayments made by credit | cards for final payment only. |
| BILLING INFORMATION               |                       |                        |                               |
| Customer Phone No:(               | )                     | _ Email Address:       |                               |
| Address:                          |                       |                        | _                             |
| City:                             | State:                | Zip Code:              |                               |



#### **INCLUDED SERVICES**

- Round trip flights from San Francisco to Tel Aviv, Israel on Delta Airlines
- All Air taxes and fuel surcharges are included in your tour package
- 7 nights accommodation in moderate 5-star hotels
- Daily Breakfasts and Dinners served daily at the hotels
- Farewell dinner in a restaurant in the evening before departure
- "Meet & Assist" at the airport by an America Israel Tours airport representative.
- Group arrival transfer escorted by your tour guide
  Group departure transfer escorted by your tour guide
- All entrance fees as per your tour program
- 7 Full days of Private touring with your assigned tour guide +arrival day tour to Jaffa
- 7 Full days of Private transportation in deluxe A/C coach and top professional driver + arrival day
  Porter fees at airports and hotels
- Sea of Galilee boat ride
- Cable car transportation from/to Masada
- All land and service taxes are included
- \$75 per person tips for the tour guide, bus driver and hotel staff
- Online registration and design of tour brochure

#### NOT INCLUDED

- Lunches daily
- Group travel insurance (optional & highly recommended)
  \$187 per person for a group Insurance policy for up to \$3000 in coverage
  \$248 per person for a group insurance policy for up to \$4000 in coverage

#### CANCELLATION POLICY

Once a deposit or full payment has been made, cancellations will only be accepted in writing. Cancellation will be applied based on the date the written cancellation is received. No refund will be paid for unused services such as: transfers, sightseeing, meals.

- Cancellation deadlines:
  - 120 + days prior to departure cancellation fee of \$100 will apply
  - 119 and 90 days prior to departure cancellation fee of \$500 will apply
  - o 89 and 60 days prior to departure cancellation fee of \$1000 will apply
  - o 59 and 45 days prior to departure cancellation fee of \$1500 will apply
  - o 44 and 31 days prior to departure cancellation fee of \$2000 will apply
  - o 30 days to day of departure or non-show cancellation fee of 100% will apply



#### **AIRFARE & TICKETS**

Passengers are responsible to provide accurate passport names for air tickets reservations. America Israel Travel, Inc. will not be held responsible for the denial of services by a carrier due to any name discrepancy. Once issuing tickets are nonrefundable & and not transferable, name changes or any ticket revisions will be subject to air carrier rebooking fee of up to \$400 per ticket. Passengers are responsible to reconfirm their flights 72 hours prior to departure for all flights.

### LAND ARRANGEMENTS

America Israel Travel, Inc. reserves the right to change the itinerary due to unforeseen circumstances. In all cases, America Israel Travel, Inc. will do its best to maintain the content of the tour. If the tour services as indicated by the itinerary cannot be supplied or there are changes in the itinerary for reasons beyond the control of America Israel Travel, Inc. we will arrange for provision of comparable services. America Israel Travel reserves the right to make changes in the itinerary whenever America Israel Travel deems it necessary to the comfort, convenience and safety of the participant at any time. No refund will be paid for unused services such as: transfers, sightseeing, meals, hotel accommodation, entrance fees, and others that are listed in the tour program.

# BAGGAGE

Luggage is the responsibility of the passenger and that of the airlines. For lost luggage claims, the passenger is responsible for notifying the airline directly.

#### PASSPORT & DOCUMENTATION

Your passport must be valid for at least six months following your entry date to your travel destination. For specific visa requirement, please contact the relevant consulate for update information.

#### LIABILITY

America Israel Travel, Inc. is responsible for making all arrangements for tour services offered in the itinerary. The airlines, hotels, land operators and other suppliers providing services are independent contractors and not agents, employees or associates of America Israel Travel Inc. America Israel Travel assumes no responsibility or liability in connection with the service of an aircraft, motor coach, rental contractors, ferries, hotels, bus operators, sight-seeing contractors or other conveyances, which may be used in the performance of its duty to the passengers. America Israel Travel, Inc. is not liable for any act, omission, delay, injury, loss or damage or nonperformance occurring in connection with these tours and suppliers. The participant agrees that America Israel Travel shall not be liable for any changes in flight schedules, delays, weather conditions, damages, losses or expenses occasioned by acts or omissions of any person, including suppliers providing services or for any acts of war.



#### CONTACT INFORMATION

**AMERICA ISRAEL TRAVEL** | 5000 N. Parkway, Suite 104, Calabasas, CA 91302

Phone: 818-704-9888 | Fax: 844-473-9182 | Toll-free: 877-248-8687 | www.americaisraeltours.com

CST: 20792240-40 | IATAN / ARC: 05-546494

# PASSENGER RESPONSIBILITY

Passenger has read the above terms and conditions and agrees to each of them. Passenger hereby warrants that he/she fully understand each of them. By signing this form I further state that I have personally read the attached terms and conditions and agree to each of them.

| Signature (s)                                  | / Date://                                    |
|--|--|
| My signature indicates that I have read and as | gread to the terms & conditions of this tour |

My signature indicates that I have read and agreed to the terms & conditions of this tour.