

Enclosed is my registration for Faith Assembly - Holy Land Tour arranged by Pastor Ejaz Nabie, May 2020

\*- this fields are mandatory

1/ Please check chosen tour package - Air + Land (\$2990) ☐ Land only (\$1750) ☐

**Part 1 – Personal details:**

Passenger 1 details – Please write your name exactly like it is written in your passport

- It is on your own responsibility to make sure the details are identical to the passport – any differences may cause additional charges

\*Full name (Title, Last, middle, first) - \_\_\_\_\_

\*Email - \_\_\_\_\_

\*Date of birth (MM/DD/YY) - \_\_\_\_\_ (must be over 21)

\*Please check - I attached copy of my passport ☐ I don't have a passport ☐

\*Passport number - \_\_\_\_\_ \*Expiry date (MM/DD/YY) - \_\_\_\_\_

- Your passport must be valid for at least 6 months from the return date

\*Mobile phone (country code + number) - \_\_\_\_\_

\*Billing address – Country - \_\_\_\_\_ State - \_\_\_\_\_ Zip/postal code - \_\_\_\_\_

\*Full address - \_\_\_\_\_

Passenger 2 details – Please write your name exactly like it is written in your passport

- It is on your own responsibility to make sure the details are identical to the passport – any differences may cause additional charges

We are using same contact info ☐

- If you are not using same contact info please fill in a different registration form

\*Full name (Title, Last, middle, first) - \_\_\_\_\_

\*Date of birth (MM/DD/YY) - \_\_\_\_\_ (must be over 21)

\*Please check - I attached copy of my passport ☐ I don't have a passport ☐

\*Passport number - \_\_\_\_\_ \*Expiry date (MM/DD/YY) - \_\_\_\_\_

- Your passport must be valid for at least 6 months from the return date



# see Israel in a different way



**Part 2 - Additional info:**

Allergies passenger 1 –

Sugar free ☐ Lactose free ☐ Gluten free ☐ Vegetarian ☐ Vegan ☐

Allergies passenger 2 –

Sugar free ☐ Lactose free ☐ Gluten free ☐ Vegetarian ☐ Vegan ☐

\*Room (please check your room choice) –

\*Double room ☐ Single room (additional cost) ☐

\*Room partner - \_\_\_\_\_ Bed Type (King, Queen, separate) - \_\_\_\_\_

Please assign me room partner ☐

\*Emergency contact –

Name - \_\_\_\_\_ phone number - \_\_\_\_\_ Relation - \_\_\_\_\_

Notes -

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**Part 3 - Payment:**

Deposit of 500 USD for Israel tours

Card holder name - \_\_\_\_\_

Card number \_\_\_\_\_ Expiration date (DD/YY) - \_\_\_\_\_ CVV (3 digit) \_\_\_\_\_

- We accept only Credit Card of Visa, Mastercard and Amex

I hereby authorize Gordon Tours Israel to charge my card with the deposit amount written above

Full name - \_\_\_\_\_ Date - \_\_\_\_\_

Signature - \_\_\_\_\_