



Walk Where Jesus Walked

Marian Pilgrimage and More - 10 Days Oct 10th-19th 2022

PERSONAL INFORMATION (Please complete one application per person, and include a copy of your passport)

Name (as printed on your passport):

First Name: _____ Middle Name: _____ Last Name: _____

First name to appear on your nametag (maybe a nickname): _____

Gender: ☐ – Female / ☐ – Male

Date of Birth: ____/____/____ (M/D/Y)

US Passport Holder: ☐ – YES / ☐ – NO

If NO (Specify): _____

Passport Number: _____

Date of Issue: ____/____/____ (M/D/Y)

Date of Expiration: ____/____/____ (M/D/Y)

Street Address: _____

City: _____

State: _____

Zip Code: _____

Home phone: (____) ____-_____

Mobile phone: (____) ____-_____

Work phone: (____) ____-_____

Email: _____

ROOM ASSIGNMENT INFORMATION

Please check one: ☐ Double occupancy

☐ Single occupancy (\$700.00 additional)

Indicate the name of your roommate / Seeking: _____

EMERGENCY CONTACT

Name: _____

Number: (____) ____-_____

(Please Sign) I acknowledge that \$ 300.00 are non -refundable, non-transferable, and are subject to airline cancellation fees and policies. No registrations will be accepted without signed acknowledgement.

I acknowledge that I have read, understood, and agree to the "Terms and Conditions" in the accompanying brochure. I agree to submit full payment 90 days prior to departure.

TOUR PRICE

☐ Cash/Check (Discounted Price is \$ 3,900.00).

☐ Credit Card 3.5% (Regular/Full Price is \$4,037.00).

Card holder's name (print): _____ Card No: _____

Exp. Date: ____/____ Security Code on card: _____ Amount: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

* Scan and email your registration form, or send hard copy by mail to the address below.

www.crownofbethlehem.com info@crownofbethlehem.com

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