



Pastors and Spouses Familiarization Tour

February 14 to 22, 2011

Escorted by Madeleine Cohen

Registration Form

PLEASE TYPE OR PRINT YOUR NAME AS IT APPEARS ON YOUR PASSPORT

CHURCH NAME: _____ **TOTAL MEMBERSHIP:** _____

MR. ___ MRS. ___ MS. ___ LAST NAME: _____ FIRST: _____

NAME AS YOU WOULD LIKE IT TO APPEAR ON NAME TAG: (SUE, BOB, BILL): _____

PASSPORT NUMBER: _____ COUNTRY: _____ EXPIRATION DATE: _____ DOB: _____

MR. ___ MRS. ___ MS. ___ LAST NAME: _____ FIRST: _____

NAME AS YOU WOULD LIKE IT TO APPEAR ON NAME TAG: (SUE, BOB, BILL): _____

*PASSPORT NUMBER: _____ COUNTRY: _____ EXPIRATION DATE: _____ DOB: _____

SPECIAL REQUESTS (FLIGHTS: MEALS, SEATING): _____

*PLEASE INCLUDE PHOTOCOPY OF PASSPORT I.D. PAGE WITH REGISTRATION FORM. IF APPLYING FOR A NEW PASSPORT, PLEASE ADVISE AND FORWARD COPY UPON RECEIPT.

PHONE-HOME: _____ WORK: _____ FAX: _____ CELL: _____

E-MAIL ADDRESS: _____

STREET/MAILING ADDRESS (NOT P.O. BOX): _____

CITY: _____ STATE: _____ ZIP CODE: _____ ROOMING WITH (IF NOT LISTED ABOVE): _____

AGE (FOR ROOMING PURPOSE): 30-39 40-49 50 & UP SPECIAL REQUESTS: (MEALS, SEATING, ETC.): _____

YOUR DEPARTURE CITY- SERVICED BY DELTA AIRLINES – TO JFK (ADDITIONAL CHARGE APPLIES)

ONE PASS OR SKY TEAM FREQUENT FLYER NUMBER (PLEASE WRITE FIRST NAME / NUMBER) _____

A \$500.00 DEPOSIT & A COPY OF YOUR ORDINATION CERTIFICATE ARE REQUIRED TO HOLD YOUR RESERVATION

DESCRIPTION	RATE PER PERSON	NUMBER OF PEOPLE	TOTAL PRICE
PASTOR RATE PER PERSON DOUBLE OCCUPANCY (MINIMUM 2 PEOPLE IN A ROOM): TOUR INCLUDES: ROUND-TRIP AIR VIA DELTA AIRLINES FROM JFK, HOTEL ACCOMMODATIONS, BREAKFAST & DINNER DAILY, SIGHTSEEING & ENTRANCE FEES, TRANSPORTATION BY DELUXE MOTORCOACH, AND HOTEL TAXES	\$1,099.00		\$
Spouse	\$1,299.00		\$
DEPARTURE CITY ADD ON Fare (to be advised and subject to airline confirmation)			\$
SINGLE SUPPLEMENT – YOUR OWN PRIVATE ROOM – AND IF NO ROOMMATE CAN BE FOUND <input type="checkbox"/> NO, I WANT A PRIVATE ROOM. I WILL PAY THE SINGLE SUPPLEMENT COST OF \$475.00	\$475.00		\$
AIRLINE TAXES AND FUEL SURCHARGE (SUBJECT TO AIRLINE INCREASE UNTIL 30 DAYS PRIOR TO DEPARTURE)	\$512.00		\$
TIPS FOR GUIDE DRIVER AND HOTEL STAFF	\$100.00		\$
SUBTOTAL	\$		\$
CREDIT CARD PAYMENT + 5%	\$		\$
\$500.00 DEPOSIT DUE PER PERSON	\$500.00		\$
BALANCE DUE LESS DEPOSIT BY NOVEMBER 4, 2010	\$		\$

Emergency Contact: Government requires that air carriers be given the full name of all passengers traveling on flights arriving and departing the United States. We must also provide each passenger the opportunity to designate an emergency contact name and phone number of a person not traveling on the flight(s). To enhance Customer service and reduce airport check in times, we request this information at this time.

Contact Name: _____ Relationship: _____ Phone: _____



Registrant Signature: _____ Date: _____

Bell Wholesale Travel, Inc.

3192 Doolittle Drive, Northbrook, IL 60062

Toll Free: (800) 637-2355 – In IL: (847) 412-0007 – Fax: (847) 412-0006

Email: reservations@bwti.com – Visit us: www.bwti.com

