

**YES! I am interested in joining St. Vincent Martyr Pilgrimage
with Jan Figenshu and Fr. Darwin Lastra
in June 2022!**

Preliminary¹ Registration Form

ALL NAMES MUST APPEAR EXACTLY AS THEY ARE ON YOUR PASSPORT

TRAVELER I:

First _____ Middle _____ Last _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ Home, () _____ Cell, () _____ Work,

() _____ Fax

Email: _____

Passport No. _____

Date of Birth: _____ Place of Birth: _____

Date of Issuing: _____ *Expiration Date: _____

(*Passport must be valid 6 months beyond the date of travel).

I have physical limitations that require special attention: Yes ___ No ___ If yes, please add anything that might be of concern: _____

Accommodations:

I would like:

___ A Double Room, shared with (roommate's name): _____

___ A Single Room (At an additional cost) ___ To be matched with a compatible roommate

If you need a roommate, we will attempt to find one for you. If we are unable to find you a roommate, you will be responsible for paying the additional single supplement cost.

Are you a smoker? ___ Yes ___ No

Would you room with a smoker? ___ Yes ___ No

¹ For as long as COVID19 rules, regulations and limitations are valid.

TRAVELER 2:

First _____ Middle _____ Last _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ Home, () _____ Cell, () _____ Work,
() _____ Fax

Email: _____

Passport No. _____

Date of Birth: _____ Place of Birth: _____

Date of Issuing: _____ *Expiration Date: _____
(*Passport must be valid 6 months beyond the date of travel).

I have physical limitations that require special attention: Yes _____ No _____ If yes, please
add anything that might be of concern: _____

Travel Preferences:

I / we will fly in coach with the group (We are holding only 26 seats on the flight!)

I / we would like to upgrade my seat on the group flight to:

Business Class

First Class

I / we prefer to order the following meal:

Regular

Vegetarian

Kosher

Other _____

Ticketing:

Kedma Israel Experience Ltd. offers El Al group flight for this program:

Flight **LY028** departs **Newark, NJ** on **May 31, 2022**, at **2:00PM** and arrives in **Tel Aviv** at **7:25AM**.
Flight **LY027** departs **Tel Aviv** on **June 10, 2022**, at **12:30AM** and arrives at **Newark, NJ** at **5:15AM**.

Group fares require a minimum number of participants and offer the convenience of the group being able to travel together. Seat assignments for groups are allocated by the airline upon check-in and we have no direct control over them. When using group fares – the airline allocates a block of seats for the group, so the group members can sit together, and seats the group members within that block. If you have any specific requirement, we will be happy to inform the airline with the hope that your request would be fulfilled.

Tour Pricing:

\$ 4,050 per person, based on double occupancy, airfare+land cost
\$ 1,150 supplement for single occupancy

The cost includes hotel overnights, transportation, guiding, attractions and site entrance fees and the specified meals. A detailed itinerary will be published.

Terms of Payment:

The amount of \$ 500 per person or \$ 1,000 per couple is due on date TBA
The amount of \$ 2,500 per person is due on date TBA
The remaining amount is due on date TBA

Dates of Payment will be advised as soon as we are able to make a commitment that the group tour would be possible within COVID19 limitations

Cancellation and Refund Policy:

Will be advised

Method of payment:

Please pay by wire transfer, personal checks or credit card (subject to surcharge, see the form below).

All payments are payable to:

Kedma Israel Experience LTD.
25 Dam HaMaccabim Street, Modiin 7174315 Israel

Method of payment (Continued):

Wire transfer instructions:

Kedma Israel Experience LTD.

Bank: Mizrahi Tfahot #20, Modiin Branch #521

Account #: 177300

Bank Address: Lev Ha'Ir Mall, Modiin, Israel

Swift Code: MIZBILIT

IBAN #: IL660205210000000177300

PLEASE READ THE ENTIRE DOCUMENT BEFORE SIGNING:

INSURANCE – DON'T LEAVE HOME WITHOUT IT:

TRAVEL INSURANCE IS HIGHLY RECOMMENDED!

It is highly recommended that you take out a comprehensive insurance coverage before traveling, to cover cancellation, medical expenses, loss of personal baggage and money, etc.

Travel insurance may be bought in the US through:

- Access America (804) 285-3300 Or (800) 284-8300, www.AccessAmerica.com
- Travel Guard International (800) 826-1300, www.TravelGuard.com
- AAA or
- American express.

Special Offer:

Kedma Israel Experience LTD. may offer group insurance policy covering the cost of the trip cancellation, trip interruption, cancellation for work related reasons and an optional addition for cancellation for any reason. This is a group policy that has no consideration of the age of the traveler/s. It requires a minimum of 10 interested participants and must be signed within 14 days from registration.

If you are interested – please check below to mark your interest and we will send you the details and cost.

RESPONSIBILITY:

Kedma Israel Experience LTD. or their agents, act only as agents for the passengers in all matters connected with hotel accommodations, sight-seeing tours and transportation, whether by air, cruise, motor coach, motor vehicle, and any other means of conveyance, and shall not be responsible or liable for any injury, loss, accident, delay or irregularity or incident resulting from strikes, pilferage, labor disputes, machinery breakdown, quarantine, weather, government regulation, or any other cause beyond their control; nor shall they be responsible for any damage or loss of luggage for any reason during the course of the trip, or act or omission of any individual or organization providing the transportation,

services, or accommodations in connection with these arrangements, nor for any delay or expense incurred due to disruption or revision of schedules, nor for any cause beyond its own control. The right is reserved to the above to withdraw a tour, or decline to accept or retain any person as a member of a tour at any time should such person's health or general deportment impede the operation of the tour to the detriment of the other tour passengers, or make changes in the published itinerary whenever in their sole time at their discretion to cancel any tour or the remainder thereof or make any alternation in route, accommodation, price, or other details, and in the event of any tour being rendered impossible, illegal, or inadvisable by weather, avalanches, strike, war, governmental interference, or any other cause whatsoever, the extra expenses incurred as a result thereof shall be your sole responsibility.

All prices are based on tariffs and exchange rates in effect on the day of registration, and are subject to change in the event of an adjustment therein.

POSSIBLE CHANGES:

Kedma Israel Experience LTD. thereafter known as the Tour Operator, reserves the right to cancel any tour before departure in which even the entire payment will be refunded without further obligation to the tour members. Infrequently, unexpected and unforeseen local conditions beyond control can prevent the completion of an itinerary, or necessitate alterations in the itinerary. Such local conditions include inclement seasonal variations in climate, changing in airline schedules and equipment, government appropriation of hotel space, labor strikes, civil disturbances or political unrest, etc., events that are beyond the Tour Operator control, and will jeopardize the travelers' comfort, safety, health and enjoyment. In these events the Tour Operator reserves the right to alter or curtail the itinerary as is deemed necessary. The Tour Operator will endeavor, in each case to provide comparable substitute or effect refunds. Any savings realized for these changes will be passed to the traveler and any resultant expanses borne by the traveler. Accidents in route may require you to miss part of your return to the U.S. WE STRONGLY ADVISE YOU TO HAVE COMPREHENSIVE TRAVEL INSURANCE (medical, accident, baggage, trip cancellation etc.). As a convenience the Tour Operator or your Travel Agent will supply you with application upon receipt of your reservation. If costs do fluctuate due to circumstances beyond our control, we reserve the right to alter our quoted price to you.

Acceptance of any travel plan shall be deemed to constitute acceptance of this limitation of responsibility.

The person making any booking will, by the making of such booking, warrant that he or she has authority to enter into a contract on behalf of the other person/s included in such a booking and in the event of the failure of any or all of the other person/s so included to make payment, the person making the booking shall by his/her signature thereof assume personal liability for the total price of all bookings made by him/her.

For and in consideration of the tour services by Kedma Israel Experience LTD. (hereafter "Tour Operator"), I hereby release and hold harmless Tour Operators and any of their agents or assigns from any and all claims arising out of their ordinary negligence for any and all risks inherent in the tour and/or inherent in transit to or from the tour destinations described herein.

I/We accept all responsibility for any and all costs arising out of treatment for injuries or damages suffered while taking part in the tour.

Any and all claims or disputes between the parties hereto shall be resolved in the courts of Israel and under Israeli law.

I give Kedma Israel Experience LTD. the right to use any photograph or video recording which includes my image or any audio recording which includes my voice, taken on the trip, unless otherwise indicated by checking this box.

I have read and fully understand the terms and conditions of this agreement.

Signature:

_____ Date: _____

I am interested in joining the group insurance policy.

Please send me the details and cost.

Signature:

_____ Date: _____



CREDIT CARD FORM

NAME AS APPEARS ON THE CREDIT CARD:

TYPE OF Card:

- VISA
- MASTER CARD
- AMERICAN EXPRESS

Credit Card Number: _____

Expiry date: _____

Billing Address:

Telephone: _____

E-mail: _____

Visa/Master Card – 3 digits on back of card: _____

American Express – 4 digits printed on card: _____

Total amount to be charged: _____

Please note there is a 2% surcharge on Visa/Mastercard credit card payments and 3% surcharge on American Express payments!

Please send us a photocopy of the card from both sides as well as a clear photocopy of the card holder passport.

Signature: _____

Thank you.

Leah Epstein-Steinmetz