BIBLE LANDS STUDIES PROGRAM
Registration
Revised 4.21.21

Yes. I want to register for the Bible Land Passages Tour to Israel and Rome scheduled for March 19 – April 2. I am sending with this form my non-refundable per person deposit, payable to **Bible Land Passages** *(one form per person.). Please include a copy of your passport photo page with this registration. Passports must be valid for 6 months PAST return travel date. I understand that space is limited and registrants will be taken on a first-come first served basis.*

Personal Information:

Name (Exactly at it appears on passport; 1 name per form)_____

Name you are called_____ Profession: _____

Education/Experience/Training _____Sex _____ Date of Birth_____

Address_____

City/State/Zip_____

Home Phone_____Work_____E-Mail_____

Emergency Contact/Relationship_____Phone #_____

Home Church _____ City_____ State _____

Rooms are based on double occupancy.

- My roommate for this trip is _____
- I need a roommate assignment _____
- I request a single room and agree to pay the $1,200.00 single supplement additional cost _____

Health*:*

I understand the trip will include stairs, uneven surfaces, and long distances to walk. _____
My health for the past year has been: □ Excellent □ Good □ Fair
My health conditions and/or impairments that tour directors should know about are as follows: _____
_____

I have read, I understand, and I agree with the Terms and Conditions for the Bible Land Passages Tour and Studies Program. (Please carefully read all Terms and Conditions listed below). I also under that Bible Land Passage Tours highly recommends the purchase of travel insurance.

Signed_____ Date_____

Mail this completed form, your non-refundable deposit per person, and copy of your passport to:
Bible Land Passages * 287 Beulah Rd.*Dripping Springs, TX*78620
For questions or information contact: johnmoore.biblepassages@gmail.com or by phone at 512-695-5099
For what to bring and how to prepare see our travel guide at www.biblepassages.net