

# TOUR REGISTRATION FORM

*The Footsteps Trail – Egypt, Jordan, and Israel  
(November 2 – November 14, 2010)*

## Traveler's Information

### Participant 1

Name (as it appears on passport)

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State, Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

Email \_\_\_\_\_

### **Passport Detail \***

Passport # \_\_\_\_\_

Nationality \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Issue \_\_\_\_\_

Place of Issue \_\_\_\_\_

Expiration Date \_\_\_\_\_

### **Emergency Contact**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Special Diet  Yes  No If Yes, please specify

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Participant 2

Name (as it appears on passport)

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State, Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_

(Cell) \_\_\_\_\_

Email \_\_\_\_\_

### **Passport Detail \***

Passport # \_\_\_\_\_

Nationality \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Issue \_\_\_\_\_

Place of Issue \_\_\_\_\_

Expiration Date \_\_\_\_\_

### **Emergency Contact**

Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Special Diet  Yes  No If Yes, please specify

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\* Your passport should have an expiration date of at least six months beyond the completion of the tour with enough visa pages.

\* If you are non-US citizen, you may need to get your visas for Egypt, Jordan and Israel in advance. Please contact us for assistance.

**Payment:**

I have read and understood the cancellation policy, please charge the \$300 per person deposit to my credit card upon receipt of this registration form and charge the balance amount when due along with other related charges as authorized.

- Visa                       American Express
- Mastercard               Discover

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature required for credit card transactions. Participant acknowledges and authorizes **Travel Ease** and its authorized associates to charge my credit card. I have carefully read the Tour details and Term and Conditions and agree to its contents.

If I decline the trip cancellation insurance, I understand all cancellation policies outlined will apply to me with no exception.

- I need Insurance, please call me.
- I will purchase on your website
- Decline insurance

**Airline Reservations:**

Do you want us to make your Delta Airline reservations from our group space?

- Yes               No

New York – Cairo // Tel Aviv – New York (Delta Airlines as shown in the flight schedule) in economy class:

Membership # \_\_\_\_\_

Meals preference \_\_\_\_\_

Seat preference \_\_\_\_\_

Do you need reservations to New York (JFK) and return?

- Yes       No

Departure City to New York (JFK) \_\_\_\_\_

Return to \_\_\_\_\_

Seat preference \_\_\_\_\_

Airline preference \_\_\_\_\_

Or lowest available \_\_\_\_\_

If you need any deviation from the above itinerary, or reservation in business class, please advice us and we will try to get you the best possible fare. Let us know if you need to be seated together with another guest travelling with you.

Special request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Airline schedules are subject to change and will be advised before final payment. If you are booking your own connecting flights, please ensure you have sufficient transit time to anticipate flight delays. The air fare included in this tour is based upon the fare in effect at the time of contract and is subject to change.

We reserve the right to pass on to the participants any price increase due to government or airline tax increase and/or increase in fuel charges, should these increases come into effect prior to departure.

**Mailing Information:**

Please make all checks payable to “**Travel Ease**” and mail with the registration form to:

Travel Ease  
333 Metro Park, Rochester, NY 14623  
Tel: 585-272-0380 / 1-800-333-0909  
Fax: 585-272-0389  
Email: info@etravelease.com