

**Registration Form-Bible Trek Tours  
Experience The Holy Land (Jun 21-30,2024)**

**Please complete one registration form per person (Couples submit two separate forms)**

Full Name (as written in passport) :

**\*(Photocopy of your passport is required – must be valid 6 months after your return date)**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone # (home/cell): \_\_\_\_\_

E-mail: \_\_\_\_\_

Rooming with: \_\_\_\_\_

Please try to find a roommate for me. *I understand if you cannot find a roommate for me, I will be obliged to pay the single room supplement.*

**\*Tour Cost and Method of Payments:** *Full package (Air & Land) \$3,545; Price is per person sharing a double room. Airfare price is based out of IAH Airport TX. Airfare price may change if departing from another City/ or Airport.*

I wish a single room at a supplement of **\$895**. *Subject to availability and conformation.*

**\*Please mail a deposit of \$400.00 per person made payable to Bible Trek Tours LLC in a form of a check.**

**Address: P.O.Box: 20137, Beaumont TX, 77720.** For a credit card payment please fill out the form in the back.

Note: The deposit should be paid at the time of booking and not later than **Mar 20, 2024**. Balance is due on or before **May 10, 2024**. Any booking after **Mar 21, 2024**. Is subject to availability.

\* For travel Insurance you can visit our home page: [www.bibletrektours.com](http://www.bibletrektours.com) and click on Travel Guard or you can get your own.

**(SUBMIT THIS BOOKING FORM WITH A COPY OF YOUR PASSPORT AND YOUR DEPOSIT)**

**\*By submitting this payment and form, I acknowledge that I have read and I accept all Terms & Conditions as outlined on this pilgrimage Brochure.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*you can Email a copy of your passport to : [info@bibletrektours.com](mailto:info@bibletrektours.com)**

**\*All package pricing is based on a minimum of 25 paying participants.**

**If the group does not reach this number, price or programming may be adjusted.**

**\*Only use this form if you wish to pay your deposit with a Credit Card**

**Credit Card Payment Authorization**

I authorize Bible Trek Tours LLC to charge the standard price amount plus 4% card fees to my credit card listed below. (\$400 will be charged now; balance of payment will be charged to your card per the invoice due date).

**Credit Card Type:** \_\_\_\_\_

**Card Number:** \_\_\_\_\_

**Exp. Date:** \_\_\_\_\_ **CVC** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Name as it appears on credit card:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*Please print, sign and scan this form for us with your registration form &a copy of your passport



**Bible Trek Tours**

***www.Bibletrektours.com***

***www.facebook.com/bibletrektours***

**P.O.Box 20137, Beaumont Texas 77720**

**Email: info@bibletrektours.com**