

19 Aviation Road, Albany, NY 12205

Ayelet Tours, Ltd.

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## HOLY LAND TOUR RESERVATION FORM

Full Name as it appears in passport	Birth Date	Passport #	Passport Issue	Date Passport Expira Date	tion Country Issue
1.					
2.					
3.					
4.					
Address:		City:		_State: Zip:	
Phone: ()	()	()	()	)	
Phone: () Home Email:	Work How	Cell did you hear about Ay	Fax yelet Tours?		
IMPORTANT: Passport must be v traveling to Petra, Jordan, Tourist ⊓ HOTEL PLAN*: ☐ Tourist ☐ Sta	Visa will be arranged	by Ayelet Tours, with			epart the US. If
DEPOSIT: A Minimum deposit of	\$500.00 per person is	s required with registra	ation.		
PAYMENT:	credit card for \$asterCard   Visa	or 🖵 Ch American Express	neck Enclosed (Pa	yable to Ayelet Tours) 1	for \$
Card Holder's name Card Holder's name	ard Number	Exp. Date	Sec.Code	Signature	
TRAVEL INSURANCE: We strong insurance. Please visit <a href="https://www.ayelet.com/www.ayelet.com/www.ayelet.com/">www.ayelet.com/ww.ayelet.com/w</a>					
NOT INCLUDED: Airfare (contact and hotel staff, travel insurance, ar * Please contact Ayelet Tours for	nd any items of a person	onal nature.	airline taxes and f	uel surcharges, tips to gu	iides, drivers
HOW TO REGISTER: Mail origing Ayelet Tours, 19 Aviation Road Phone: 800-237-1517 * Fax: 5	d, Albany, NY 1220	)5	ax, or scan/email)	to:	
CANCELLATION POLICY: \$100 pe if canceled 30 days or less prior to dep					
AGREEMENT: I have read, understar accepted subject to these terms and con		s and conditions listed h	erein and on ayelet.	com, & understand my rese	ervation is
		_			
Signature:		Da	ite:		

of the services included in the tour. The right is reserved to cancel or change itineraries or to substitute comparable service without notice. The right is reserved to decline to accept or retain any tour passengers should such person's health or general deportment impede the operation of the tour to the detriment of the other tour passengers.