



Miracles Happen 2023 Israel Tour

with Joan Hunter

September 1-12, 2023

REGISTRATION FORM

Tour cost includes the following:

- * 2 nights in Tel Aviv (Sept.2-4, 2023)
- * 2 nights in Tiberias (Sept.4-6, 2023)
- * 5 nights in Jerusalem (Sept. 6-11, 2023)
- * Breakfast & Dinner daily
- * 2 lunches
- * Touring in a deluxe air-conditioned bus
- * English-speaking guide
- * Sightseeing and all entrance fees to sites
- * Group Arrival transfer: Included for those landing at TLV between 4pm – 6pm on Sep 2
- * Group Departure transfer: Included for those leaving for the airport after dinner on September 11
- * Hotel taxes and service charges
- * Portage

Tour cost does not include:

- * Tips to guides, driver & dining room waiters (pre-collected - \$150/person)
- * Visas (if required)
- * Meals not listed as included
- * Items of a personal nature
- * Travel insurance (recommended – [group policy](#) available)

ONLINE REGISTRATION AVAILABLE AT:

<https://secure.ayelet.com/JoanHunterSept2023.aspx>

Please check the appropriate boxes to sign up for your tour:

TOUR PRICING Price per person	Rate per person (Check or Credit)
LAND TOUR (double occupancy)	<input type="checkbox"/> \$2,990
Additional Cost for Single Occupancy	<input type="checkbox"/> \$1,075

Please add an additional stay for me at the **Leonardo Gordon Beach Hotel Tel Aviv** (\$330/night double occupancy)
Dates: From: _____ To: _____

Please add an additional stay for me at the **Prima Kings Hotel Jerusalem** (\$290/night double occupancy)
Dates: From: _____ To: _____

Please contact me for flight quotes from _____ (City of origin)

Please add the [group insurance policy](#) to my reservation (insurance cost will be added to your invoice after booking)

Person 1 (Please enter name information as it appears on the passport):

First name: _____ Middle name: _____ Last name: _____

Nationality: _____ DOB: _____ Gender: _____ Passport No.: _____ Exp: _____

Name to appear on name tag: _____ Sharing with: _____ OR

Please assign a same-sex roommate

Person 2 (Please enter name information as it appears on the passport):

First name: _____ Middle name: _____ Last name: _____

Nationality: _____ DOB: _____ Gender: _____ Passport No.: _____ Exp: _____

Name to appear on name tag: _____ Sharing with: _____

Mailing Address:

Address: _____ City: _____ State: _____ Zip _____

Home Phone: _____ Cell: _____ Email: _____

ADDITIONAL INFORMATION:

- Food Allergies/Special Requests: _____
- I am traveling with the following friends who are booking separately: _____
- I require medication or treatment assistance (please specify): _____

**PLEASE SUBMIT PASSPORT PICTURE PAGE FOR EACH TRAVELER,
REQUIRED IN ADVANCE OF TRAVEL.**

I AM SUBMITTING THIS FORM WITH A \$500 PER PERSON DEPOSIT

PAYMENT (Full payment is due by June 3, 2023)

Total deposit to be paid: # of people _____ X \$500 per person = \$ _____

- Check (payable to Ayelet Tours, Ltd.)
- Credit Card: Please contact me to set up a credit card payment plan.

Name as it appears on card: _____

Credit Card #: _____ Exp: _____ Security Code: _____

Billing Address: _____ City: _____ State: _____ Zip _____

Today's Date: _____ Signature: _____

CANCELLATION POLICY: No land penalty if canceled 121 or more days before departure for payments by check (for credit card payment, minus \$25 per person non-recoverable cost), plus any applicable airline penalties. \$250 per person charged if canceled 120 to 91 days prior to departure, plus any applicable airline penalties. \$500 per person charged if canceled 90 to 31 days prior to departure, plus any applicable airline penalties. 100% per person charged if canceled 30 days or less before departure. Applicable airline penalties may still apply. If purchased, group travel insurance policy becomes non-refundable 90 days before departure. See ayelet.com for more details.

By completing and submitting this form, I agree to the terms and conditions listed below:

Disclaimer: Ayelet Tours, Ltd., Joan Hunter Ministries and IGT act only as agents for the tour members in making arrangements for hotels, transportation, touring, restaurants or any other services in connection with the itinerary. We will exercise reasonable care in making such arrangements. However, we do not assume any liability whatsoever for any injury, damage, loss, accident, delay or irregularity to person and property because of an act of default of any hotel, airline carrier, restaurant, company, or person rendering any of the services included in the tour. The right is reserved to cancel or change itineraries or to substitute comparable services 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.

IMPORTANT: Passport must be valid for 6 months after your return travel date. Please notify us if you have difficulty walking, as the tour will include times of extensive walking. Should you need a wheelchair, we require that you are able to get on and off the bus unaided and/or that you have a paying tour member joining you on the tour to assist when necessary. It is important that you request a wheelchair prior to arrival.

MAIL FORM AND PAYMENT TO:

Ayelet Tours, Ltd.
ATTN: Joan Hunter Ministries
19 Aviation Road
Albany, NY 12205

PHONE: 800.237.1517 or 518.783.6001

FAX: 518.783.6003

EMAIL: caralie@ayelet.com

