

DFW New Beginnings, One New Man's Israel Pilgrimage # 16866: May 18 – 29, 2019

Last name _____ First name _____ Nickname _____

Last name _____ First name _____ Nickname _____

(Please provide a copy of your passport prior to final payment.)

Address _____ City _____

State _____ Zip _____ Tel _____ email _____

Departure city: _____

Price per person in a double room: \$4,895. Price per person in a single room: \$5,895

Upgrade to Business/First class (supplement of \$4,750 per person)? Yes ___ No ___

Seats are very limited and airfare prices are subject to change until final payment is received.

Do you wish to purchase travel insurance? Yes ___ No ___

If yes, please add the applicable amount listed below based on your total trip cost:

\$408 p/person based on trip cost up to \$5,000

\$447 p/person based on trip cost up to \$6,000

\$563 p/person based on trip cost up to \$7,000

\$800 p/person based on trip cost up to \$10,000 (for those flying Business Class)

Travel insurance is highly recommended and **nonrefundable**.

I hereby sign and agree to the terms and conditions attached to this form:

Signature X _____

Please sign this form and return it with your **nonrefundable** deposit of \$800/person, payable to:

Ya'lla Tours USA. Mail check or fax/email credit card form:

Ya'lla Tours USA, Attention: Tracy Singer

4711 SW Huber St., # 1, Portland Oregon 97219

Phone: (800) 644-1595 X 106 // Fax: (503) 977-3765 // tracy@yallatours.com

For credit card charge (VI, MC, DS, AEMX):

Credit card type _____ Name on the card _____

Card number _____ Exp. _____ Security code _____

Billing address if different from above _____

I hereby authorize **Ya'lla Tours USA** to charge my credit card \$ _____ as a deposit for the **DFW New Beginnings ~ One New Man's Israel Pilgrimage trip**. By signing this form, I further state that I have personally read the attached terms and conditions and agree to each of them. Specifically, I understand that should I cancel my trip for any reason, I will be charged the cancellation fee set out in the "Cancellations & Refunds" section.

Signature for the credit card X _____

C.S.R. #2034190-40