

## 10 Day Holy Land Pilgrimage

**Please complete this form and mail with payment to the Sue Smith Vacations address at the bottom of the form  
Enclosed is my payment and copy of my passport photo page for the 10 Day Holy Land Pilgrimage BN: ?????**

**PASSENGER #1 NAME:** \_\_\_\_\_

Clearly print name as it appears on your passport: (Last, First, Middle)

PASSENGER #1 Name desired for nametag: \_\_\_\_\_

Rooming With: \_\_\_\_\_ Single Room (Additional Cost):  Yes  No

PASSENGER #1 Passport No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**PASSENGER #2 NAME (if residing in same household as Passenger 1):** \_\_\_\_\_

Clearly print name as it appears on your passport: (Last, First, Middle)

PASSENGER #2 Name desired for nametag: \_\_\_\_\_

PASSENGER #2 Passport No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Information: Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_ \$350 per person reservation deposit plus applicable optional insurance (see terms and conditions for pricing)

\_\_\_\_ \$350 per person reservation deposit

\_\_\_\_ I am paying my deposit with a check made payable to Sue Smith Vacations. Amount \$ \_\_\_\_\_

\_\_\_\_ I am paying my deposit with a credit/debit card.

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ \* Security Code \_\_\_\_\_ Amount \_\_\_\_\_

(We accept: Visa, MC, Am Express and Discover.) **3% processing fee will be added to your payment**

Name that appears on credit card: \_\_\_\_\_ Allergies/health issues: \_\_\_\_\_

Signature of passenger(s): \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_

Enrollment and payment for the tour constitutes your acceptance of the program conditions.

**Important: For security reasons Sue Smith Vacations requests a copy of your passport picture page to ensure correct name on reservations.**

**Sue Smith Vacations 3806 John F. Kennedy Boulevard.**

**North Little Rock, AR 72116 \* Office: (501) 771-0987 \* Fax: (501) 771-0563**

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