

## RESERVATION FORM

# **WATCHMEN & WOMEN ON THE WALLS IN JERUSALEM JANUARY 3-7, 2019**

Package price per person, including overnight stay at the Yehuda Hotel  
based on double occupancy: \$825 / GBP 644 / EUR 727  
based on single room occupancy: \$1,089 / GBP 851 / EUR 950

Special rate per person at the Yehuda Hotel per night for pre/post conference, with daily breakfast:  
In a shared room: \$65 / GBP 52 / EUR 58 . In a single room: \$117 / GBP 92 / EUR 103

\* cost in UK Pounds, Euros and other currencies calculated at exchange rate  
on day of payment day. For credit / debit card payment; add 3.50%

NAME (per passport) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Tel No.: (     ) \_\_\_\_\_ Work Tel No.: (     ) \_\_\_\_\_

Name of roommate, if known \_\_\_\_\_ E-mail: \_\_\_\_\_

Passport nationality: \_\_\_\_\_ Pass. Number \_\_\_\_\_ Pass expiry date \_\_\_\_\_

Flight to/from TLV date / time: Arrival \_\_\_\_\_ Departure \_\_\_\_\_

I would like to check into the hotel on date \_\_\_\_\_ and check out date \_\_\_\_\_

(    ) I would like to request a single room.

***I am responsible to arrange my own travel insurance and therefore I hereby indemnify Exploits Ministry, Daystar International and Ami Travel from any expenses due to items not included in the tour package, medical needs, injury or theft.***

Signed \_\_\_\_\_ Date \_\_\_\_\_

Enclosed is my payment of \$350 per person. Balance due December 1, 2019.

For credit card payments. Add 3.50%. See form below.

Checks in USD\$ - payable to AMI Travel and mail to:

From USA: AMI Travel, attn. Lebbie. 5803 N. Cicero Ave., Chicago, IL 60646.

Outside USA: Amos Mazur, 22 Groneman Street. Tel Aviv 69972, Israel.



**CREDIT CARD AUTHORIZATION FORM**

Please print / complete and sign this form and scan / return to: amos@amitravel.com

**NAME** (Print exactly as it appears on the credit card)

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First Name Last Name Phone Number

**ADDRESS** (as appears on credit card statement)

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Number Street Apt. # City State ZIP

**TYPE OF CARDS ACCEPTED**

Please check:  VISA  MASTERCARD  AMEX  DISCOVER

**Credit Card Number:**

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**AMOUNT OF CHARGE:** \$ \_\_\_\_\_ **EXP. DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
**PROCESSING FEE:** (3.50%) \$ \_\_\_\_\_ **CVV:** (digits in the back of the card) \_\_\_\_\_  
**TOTAL AMOUNT:** \$ \_\_\_\_\_

This charge is to applied to the following participants:

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I hereby authorize AMI Travel, Inc. and/or its suppliers to charge the above credit card for the listed amount.

Card Holder Signature: \_\_\_\_\_

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

Approval #: \_\_\_\_\_