

FILL OUT & RETURN FORM

Jewish Jewels Mercy Mission November 6-17, 2016

- ☐ Yes, I/we are excited about this tour. Enclosed is my/our tour deposit of \$300 per person
- ☐ Enclosed is a copy of the inside cover of my passport with photo OR ☐ Passport being applied for
- ☐ My AIRLINE departure city will be: ☐ FT Lauderdale (add \$98) ☐ Other city _____
- ☐ I wish to room with _____ OR ☐ I wish a single room. Single supplement of \$799 will be applied.

Name 1 _____ Name Tag Name 1 _____
(As it appears on your passport)

Name 2 _____ Name Tag Name 2 _____
(As it appears on your passport)

Street Address _____

City _____ State _____ Zip _____

Telephone Home: () _____ Cell: () _____

E: Mail: _____

Release Waiver: *I have been advised and am aware of the US State Department Travel Advisory to Israel. I have gone online to: www.travel.state.gov. I am traveling to Israel by my own free will and choice. Accordingly, I understand that neither Mauro Travel & Tours, Regina Mauro, Jewish Jewels, Neil Lash or Jamie Lash, or Jon Lash, nor its employees or agents have made, nor can make any representation or guaranty regarding my individual safety on this trip. Therefore, I agree to hold all of the above persons harmless for and from any and all personal injury and/or property damage that arises from or during my stay in Israel.*

By signing below, you agree to the Terms & Conditions as outlined in the Jewish Jewels 2016 Mercy Mission Flyer, and understand and agree to the above Release Waiver.

Name 1 _____ Name 2 _____