

# Formulario de inscripcion

Peregrinación de 12 días a  
**Turquía y Grecia**  
con crucero de 3 días



**Fecha de peregrinación:**

Septiembre, 13 - 24, 2024

**Costo por persona:**

\$4,850

**Ciudad de salida:**

Boise, Idaho

**para mas informacion:**

Nativity Pilgrimage



(832) 406-7050 info@nativitypilgrimage.com

## PARA USO DE OFICINA

Date	Payment	Check #

Entiendo que es mi responsabilidad obtener las visas/permisos de reingreso necesarios para este viaje si no tengo un pasaporte estadounidense. LOS PASAPORTES DEBEN SER VÁLIDOS DESPUÉS DE 6 MESES DE SALIDA.

He leído y acepto todos los términos y condiciones establecidos en este folleto.  
**IMPRIMA Y ADJUNTE UNA COPIA DE SU PASAPORTE CON ESTE REGISTRO. LOS NOMBRES EN ESTE FORMULARIO Y EL PASAPORTE DEBEN COINCIDIR EXACTAMENTE.**

Apellidos como en el pasaporte:		Nombres como en el pasaporte:	
Dirección:		Ciudad/ Estado/Código Postal:	
Teléfono (incluyendo código):		Correo Electronico:	
Numero de Pasaporte:	País de Expedición:	País de Expedición:	
Fecha de Caducidad:	Fecha de Nacimiento: (Dia, Mes, Año):	Sexo: <input type="checkbox"/> F <input type="checkbox"/> M	
En caso de Emergencia, por favor contactar a (Nombre y Numero de Teléfono):			
<b>Necesidades Especiales</b>			
<input type="checkbox"/> Quiero como compañero/a de habitación a (Nombre de la Persona):			
<input type="checkbox"/> Necesito un/a compañero/a de habitación:			
<input type="checkbox"/> Necesito una habitación individual el costo es de \$1,000			

Adjunte un depósito no reembolsable no transferible de \$300 por persona mediante cheque o tarjeta de crédito (ver Términos y condiciones) con la solicitud y copia del pasaporte a: **Nativity Pilgrimage | 15710 JFK Blvd. Suite 225, Houston, TX 77032**

### Opciones de pago

Check  Master Card  Visa  American Express  Discover

Número de Tarjeta de Crédito \_\_\_\_\_ código postal \_\_\_\_\_ fecha de caducidad \_\_\_\_\_ CVV Code \_\_\_\_\_

(Haga los cheques a nombre de Nativity Pilgrimage) (Hay un cargo del 3% para todos los pagos con tarjeta de crédito)

- Cargue mi DEPÓSITO ahora y el saldo adeudado 100 días antes de la salida.
- Cobrar el costo TOTAL de mi viaje ahora (excluye cualquier seguro)
- El cheque adjunto es SOLO PARA DEPÓSITO
- El cheque adjunto es por el costo TOTAL del viaje (excluyendo cualquier seguro)
- Cargue el DEPÓSITO SOLAMENTE a mi tarjeta de crédito

Entiendo que es mi responsabilidad obtener las visas/permisos de reingreso necesarios para este viaje si no tengo un pasaporte estadounidense. Entiendo que los pasaportes deben tener una validez de 6 meses después de la fecha de regreso programada y he leído y estoy de acuerdo con todos los términos y condiciones establecidos en el folleto.

NOMBRE EN IMPRENTA: \_\_\_\_\_ FIRMA: \_\_\_\_\_ FECHA: \_\_\_\_\_



**BENEFITS OF COVERAGE**

**MAXIMUM BENEFIT AMOUNT**

Trip Cancellation	<b>100% of Trip Cost</b> (Up to a Max. of \$15,000)
Trip Interruption	<b>150% of Trip Cost</b> (Up to a Max. of \$22,500)
Missed Connection	<b>\$1,000</b> (3 hours or more)
Trip Delay	<b>\$1,000</b> (12 hours or more)
Baggage Delay	<b>\$400</b> (12 hours or more)
Baggage & Personal Effects	<b>\$2,000</b>
Rental Property Damage Liability	<b>\$5,000</b>
Accident & Sickness Medical Expense	<b>\$150,000</b>
Emergency Medical Evacuation & Repatriation	<b>\$1,000,000</b>
24-Hour AD&D	<b>\$10,000</b>
AD&D Common Carrier	<b>\$25,000</b>
Pre-Existing Medical Condition Exclusion Waiver	<b>Included</b>
Non-Insurance & Travel Assistance Services	<b>Included</b>
Rental Car Damage Coverage	<b>\$50,000</b>
Cancel for Any Reason	<b>75% of non-refundable trip cost</b>

Optional Upgrades

TRIP COST BANDS	0 - 34	35 - 55	56 - 64	65 - 70	71 - 80	81+
\$0	\$28.43	\$28.27	\$28.58	\$28.91	\$33.26	\$46.70
\$1 - \$500	\$41.46	\$43.63	\$50.37	\$56.75	\$69.92	\$103.49
\$501 - \$1,000	\$53.77	\$57.90	\$70.00	\$81.25	\$101.96	\$152.69
\$1,001 - \$1,500	\$66.45	\$72.58	\$90.13	\$106.32	\$134.69	\$202.83
\$1,501 - \$2,000	\$77.84	\$85.66	\$107.79	\$128.07	\$162.93	\$245.81
\$2,001 - \$2,500	\$91.11	\$100.81	\$127.95	\$152.58	\$194.62	\$293.72
\$2,501 - \$3,000	\$101.97	\$113.56	\$145.86	\$175.33	\$224.47	\$339.75
\$3,001 - \$3,500	\$114.38	\$127.97	\$165.72	\$200.16	\$256.90	\$389.43
\$3,501 - \$4,000	\$130.99	\$147.49	\$193.25	\$235.20	\$302.98	\$460.72
\$4,001 - \$4,500	\$141.16	\$159.20	\$209.13	\$254.80	\$328.46	\$499.49
\$4,501 - \$5,000	\$153.33	\$173.44	\$228.98	\$279.87	\$361.19	\$549.59

**Optional Upgrades**

Cancel for Any Reason: 1.7 x the plan costs listed above      Rental Car Damage Coverage: \$10 per day



**OPTIONAL CANCEL FOR ANY REASON**

The Optional Cancel for Any Reason (CFAR) provides reimbursement for 75% of the prepaid, non-refundable, forfeited payments you paid for your trip if you cancel your trip for any reason not otherwise covered by this plan. Must be purchased with initial plan and within 14 days of the date your initial payment or deposit for your trip is received and you cancel your trip no later than 2 days prior to the scheduled departure date of your trip. This Optional Cancel for Any Reason Benefit does not cover the failure of the Retail Travel Supplier to provide the bargained-for Travel Arrangements due to cessation of operations for any reason.

**15 DAY FREE LOOK**

If you are not satisfied within 15 days of purchasing this plan, you can get 100% refund of your plan cost provided you haven't had a loss, claim or traveled yet.

**NON-INSURANCE AND TRAVEL ASSISTANCE SERVICES**

24-hour travel assistance services are provided by On Call International.

**Trawick International**

<https://nativity.trawickinternational.com>  
PO Box 2284 • Fairhope, Alabama 36533  
(833) 667-4462



**\*CLICK HERE TO VIEW PLAN DOCUMENT\***

This advertisement contains highlights of the plans, which include travel insurance coverages underwritten by United States Fire Insurance Company under form series T7000 et. al., T210 et. al. and TP-401 et. al. The Crum & Forster group of companies is rated A (Excellent) by AM Best 2021. C&F and Crum & Forster are registered trademarks of United States Fire Insurance Company. The plans also contain noninsurance Travel Assistance Services provided by Nativity Pilgrimage. Coverages may vary and not all coverage is available in all jurisdictions. Insurance coverages are subject to the terms, limitations and exclusions in the plan, including an exclusion for pre-existing conditions. In most states, your travel retailer is not a licensed insurance producer/agent, and is not qualified or authorized to answer technical questions about the terms, benefits, exclusions, and conditions of the insurance offered or to evaluate the adequacy of your existing insurance coverage. Your travel retailer may be compensated for the purchase of a plan and may provide general information about the plans offered, including a description of the coverage and price. The purchase of travel insurance is not required in order to purchase any other product or service from your travel retailer. CA D01 toll free number: 800-927-4357. MD Insurance Administration: 800-492-6116 or 410-468-2340. The cost of your plan is for the entire plan, which consists of both insurance and non-insurance components. Individuals looking to obtain additional information regarding the features and pricing of each travel plan component, please contact Trawick International. Trawick International, Post Office Box 2284, Fairhope AL 36533; (888) 301-9289; Info@TrawickInternational.com; California License No. 0K02805.