| Join us for a Spiritual Journey to  |  | For                                    | Office Use          | Only    |
|---|--|--|---------------------|---------|
| The Holy Lar  | nd Nativ   | Date                                   | Payment             | Check # |
| 10-Day Pilgrii  | mage Registration  | Form                                   |                     |         |
| <b>Dates:</b> September 9 - 18, 2024  |  |  |                     |         |
| Cost: \$3,999 per person  |  | N <u> </u>                             |                     |         |
| <b>Departure:</b> Round-trip air from Aust  | in, TX   | —————————————————————————————————————— |                     |         |
| Tour Operated by: Nativity Pilgrima   | ge <b>18.46 h.</b>   | 388 I                                  |                     |         |
| Phone: 832-406-7050   | <b>731-7</b> 7   | 200                                    |                     |         |
| Email: info@nativitypilgrimage.com  | <b>一直整治</b>  |  |                     |         |
| Website: www.nativitypilgrimage.com   | $\frac{n}{2} \qquad \qquad \text{Trip Code} = 3$   | 146                                    |                     |         |
| I have read and agreed to all the term PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PA   | OF YOUR PASSPORT WITH THI  | S REGISTRATION.                        |                     |         |
| PLEASE PRINT & ATTACH COPY<br>NAMES ON THIS FORM AND PAS  | OF YOUR PASSPORT WITH THI  | S REGISTRATION.                        |                     |         |
| PLEASE PRINT & ATTACH COPY<br>NAMES ON THIS FORM AND PAS  | OF YOUR PASSPORT WITH THI<br>SSPORT MUST MATCH EXACTLY<br>First name   | S REGISTRATION.                        |                     |         |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  F Address  | OF YOUR PASSPORT WITH THI<br>SSPORT MUST MATCH EXACTLY<br>First name   | S REGISTRATION.                        |                     |         |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  Address  Phone # (including area code)   | OF YOUR PASSPORT WITH THISSPORT MUST MATCH EXACTLY First name  City, State   | S REGISTRATION.  Middle  e, Zipcode    | of issue            |         |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  Address  Phone # (including area code)  Passport Number  | COF YOUR PASSPORT WITH THI SSPORT MUST MATCH EXACTLY First name  City, State  Email                                | S REGISTRATION.  Middle  e, Zipcode    | of issue  Gender: M | F       |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  Address  Phone # (including area code)  Expiration date  | COF YOUR PASSPORT WITH THIS SPORT MUST MATCH EXACTLY First name  City, State  Email  Place of issue  Date of birth | S REGISTRATION.  Middle  e, Zipcode    |                     | F       |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  Address  Phone # (including area code)  Passport Number  Expiration date                                     | COF YOUR PASSPORT WITH THIS SPORT MUST MATCH EXACTLY First name  City, State  Email  Place of issue  Date of birth | S REGISTRATION.  Middle  e, Zipcode    |                     | F       |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name  Address  Phone # (including area code)  Passport Number  Expiration date  Emergency Contact (name & phone no | COF YOUR PASSPORT WITH THIS SPORT MUST MATCH EXACTLY First name  City, State  Email  Place of issue  Date of birth | S REGISTRATION.  Middle  e, Zipcode    |                     | F       |
| PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PAS Last name   | COF YOUR PASSPORT WITH THIS SPORT MUST MATCH EXACTLY First name  City, State  Email  Date of birth  umber)         | S REGISTRATION.  Middle  e, Zipcode    |                     | F       |

Please enclose a \$300 per person non-refundable non-transferable deposit by check or credit card (see Terms & Conditions) with application and copy of passport to: Nativity Pilgrimage | 15710 JFK Blvd. Suite 225, Houston, TX 77032

| <u> </u>                                    | ment Options  Visa ☐ American Express ☐ Discover             |
|---|--|
| Check Master Card                           | Visa   |
|   | · · · · · · · · · · · · · · · · · · ·                        |
| Credit Card # Zip                           | codeExp. Date CVV Code                                       |
| (Please make checks payable to Nativity Pil | grimage) (There is a 3% charge for all credit card payments) |

| L | Check enclosed for <b>DEPOSIT ONLY</b> | Check enclosed for | TOTAL trip cost (excluding any is | insurance) Charge <b>DEPOSI</b> | T ONLY to my credit card |
|---|--|--------------------|-----------------------------------|---------------------------------|--------------------------|
|   |  |                    |                                   |                                 |                          |
|   |  |                    |                                   |                                 |                          |

I understand it is my responsibility to obtain any visas/re-entry permits necessary for this trip if I do not hold an American passport. I understand passports must be valid for 6 months after the scheduled return date and I have read and agreed on all the terms and conditions as set forth in the brochure.

DATE:

SIGNATURE:

PRINT NAME:



BENEFITS OF COVERAGE



MAXIMUM BENEFIT AMOUNT

# SAFE TRAVELS FIRST CLASS

Travel Protection Plan

|     | 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   |  |   | (3 ho  | <b>\$1,000</b><br>ours or m   | ore)   |   |  |
|     | Trip Delay  |  |   | (12 h  | <b>\$1,000</b><br>ours or n   | nore)  |   |  |
|     | Baggage Delay   |  |   |  | (12 h   | <b>\$400</b><br>ours or n  | nore)   |  |
|     | Baggage & Personal Effects  |  |   | \$2,000  |   |  |   |  |
|     | Rental Property Damage Liability  |  |   |  | \$5,000   |  |   |  |
|     | Accident & Sickness Medical Expense   |  |   | \$150,000  |   |  |   |  |
|     | Emergency Medical<br>Evacuation & Repatriation  |  |   | \$1,000,000  |   |  |   |  |
|     | 24-Hour AD&D  |  |   |  | \$10,000  |  |   |  |
|     | AD&D Common Carrier   |  |   |  | \$25,000  |  |   |  |
|     | Pre-Existing Medical Condition<br>Exclusion Waiver  |  |   |  | Included  |  |   |  |
|     | Non-Insurance & Travel Assistance Service   |  |   |  | ces   | Included   |   |  |
| ľ   | Rental Car Damage Coverage  |  |   |  | \$50,000  |  |   |  |
|     | Cancel for Any Reason   |  |   | 75% of non-refundable trip cost  |   |  |   |  |
|     | Cancel for Any  | , riodoon  |   |  |   |  |   |  |
|     | Cancel for Any  | 0 - 34   | 35 - 55   | 56 - 64  | 65 - 70   | 71 - 80  | 81+   |  |
|     |   |  | <b>35 - 55</b><br>\$28.27   | <b>56 - 64</b><br>\$28.58  | <b>65 - 70</b><br>\$28.91   | 71 - 80<br>\$33.26   | <b>81</b> +   |  |
| Г   | RIP COST BANDS  | 0 - 34   |   |  |   |  |   |  |
| Г   | RIP COST BANDS  | <b>0 - 34</b><br>\$28.43   | \$28.27   | \$28.58  | \$28.91   | \$33.26  | \$46.70   |  |
| Г   | \$0<br>\$1 - \$500  | <b>0 - 34</b><br>\$28.43<br>\$41.46  | \$28.27<br>\$43.63  | \$28.58<br>\$50.37   | \$28.91<br>\$56.75  | \$33.26<br>\$69.92   | \$46.70<br>\$103.49   |  |
| T T | \$0<br>\$1 - \$500<br>\$501 - \$1,000   | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77  | \$28.27<br>\$43.63<br>\$57.90   | \$28.58<br>\$50.37<br>\$70.00  | \$28.91<br>\$56.75<br>\$81.25   | \$33.26<br>\$69.92<br>\$101.96   | \$46.70<br>\$103.49<br>\$152.69<br>\$202.83   |  |
| Г   | \$0<br>\$1 - \$500<br>\$501 - \$1,000<br>\$1,001 - \$1,500  | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77<br>\$66.45   | \$28.27<br>\$43.63<br>\$57.90<br>\$72.58  | \$28.58<br>\$50.37<br>\$70.00<br>\$90.13   | \$28.91<br>\$56.75<br>\$81.25<br>\$106.32   | \$33.26<br>\$69.92<br>\$101.96<br>\$134.69   | \$46.70<br>\$103.49<br>\$152.69<br>\$202.83<br>\$245.81                                     |  |
| Г   | \$0<br>\$1 - \$500<br>\$501 - \$1,000<br>\$1,001 - \$1,500<br>\$1,501 - \$2,000   | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77<br>\$66.45<br>\$77.84                                    | \$28.27<br>\$43.63<br>\$57.90<br>\$72.58<br>\$85.66                                     | \$28.58<br>\$50.37<br>\$70.00<br>\$90.13   | \$28.91<br>\$56.75<br>\$81.25<br>\$106.32<br>\$128.07                                     | \$33.26<br>\$69.92<br>\$101.96<br>\$134.69<br>\$162.93                                     | \$46.70<br>\$103.49<br>\$152.69<br>\$202.83<br>\$245.81<br>\$293.72                         |  |
| Г   | \$0<br>\$1 - \$500<br>\$501 - \$1,000<br>\$1,001 - \$1,500<br>\$1,501 - \$2,000<br>\$2,001 - \$2,500                      | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77<br>\$66.45<br>\$77.84                                    | \$28.27<br>\$43.63<br>\$57.90<br>\$72.58<br>\$85.66<br>\$100.81                         | \$28.58<br>\$50.37<br>\$70.00<br>\$90.13<br>\$107.79<br>\$127.95                         | \$28.91<br>\$56.75<br>\$81.25<br>\$106.32<br>\$128.07<br>\$152.58                         | \$33.26<br>\$69.92<br>\$101.96<br>\$134.69<br>\$162.93<br>\$194.62                         | \$46.70<br>\$103.49<br>\$152.69<br>\$202.83<br>\$245.81<br>\$293.72<br>\$339.75             |  |
| Г   | \$0<br>\$1 - \$500<br>\$501 - \$1,000<br>\$1,001 - \$1,500<br>\$1,501 - \$2,000<br>\$2,001 - \$2,500<br>\$2,501 - \$3,000 | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77<br>\$66.45<br>\$77.84<br>\$91.11<br>\$101.97             | \$28.27<br>\$43.63<br>\$57.90<br>\$72.58<br>\$85.66<br>\$100.81<br>\$113.56             | \$28.58<br>\$50.37<br>\$70.00<br>\$90.13<br>\$107.79<br>\$127.95<br>\$145.86             | \$28.91<br>\$56.75<br>\$81.25<br>\$106.32<br>\$128.07<br>\$152.58<br>\$175.33             | \$33.26<br>\$69.92<br>\$101.96<br>\$134.69<br>\$162.93<br>\$194.62<br>\$224.47             | \$46.70<br>\$103.49<br>\$152.69<br>\$202.83<br>\$245.81<br>\$293.72<br>\$339.75<br>\$389.45 |  |
| T   | \$0<br>\$1 - \$500<br>\$501 - \$1,000<br>\$1,001 - \$1,500<br>\$1,501 - \$2,000<br>\$2,001 - \$2,500<br>\$2,501 - \$3,500 | 0 - 34<br>\$28.43<br>\$41.46<br>\$53.77<br>\$66.45<br>\$77.84<br>\$91.11<br>\$101.97<br>\$114.38 | \$28.27<br>\$43.63<br>\$57.90<br>\$72.58<br>\$85.66<br>\$100.81<br>\$113.56<br>\$127.97 | \$28.58<br>\$50.37<br>\$70.00<br>\$90.13<br>\$107.79<br>\$127.95<br>\$145.86<br>\$165.72 | \$28.91<br>\$56.75<br>\$81.25<br>\$106.32<br>\$128.07<br>\$152.58<br>\$175.33<br>\$200.16 | \$33.26<br>\$69.92<br>\$101.96<br>\$134.69<br>\$162.93<br>\$194.62<br>\$224.47<br>\$256.90 | \$46.70<br>\$103.49<br>\$152.69   |  |



#### **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 that 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\*

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