Marian Shrines



10-Day Pilgrimage

Dates: May 13 - 22, 2024
Cost: \$4,099 per person

Departure: Round-trip air from Newark

Tour Operator: Nativity Pilgrimage

Phone: 832-406-7050

PRINT NAME:

Email: info@nativitypilgrimage.com **Website:** www.nativitypilgrimage.com



Registration Form



Trip	Code	= 3446
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For Office Use Only			
Date	Payment	Check #	

DATE:

	111p Code = 3410					
I understand it is my responsibility to PASSPORTS MUST BE VALID AFT	obtain any visas/re-entry permit necessary for YER 6 MONTHS OF DEPARTURE.	r this trip if I don't hol	d an American Passp	ort.		
	s and conditions as set forth in this brochure. OF YOUR PASSPORT WITH THIS REGIST SPORT MUST MATCH EXACTLY.	TRATION.				
Last name First name Middle						
1						
Address	City, State, Zipcoo	de				
	<u>'</u>					
Phone # (including area code)	Email					
Passport Number	Place of issue	Date of	issue			
		-				
Expiration date	Date of birth		Gender: M	F		
Emergency Contact (name & phone nu	umber)					
Special room accommodations						
I want to room with (first & l	ast name)					
I need a roommate						
I want a single room (at an ac	lditional \$800)					
	ndable non-transferable deposit by check or cr t to: Nativity Pilgrimage 15710 JFK Blvd. S			plication and		
	Payment Options					
Check Ma	aster Card Visa Ame	erican Express	Discover			
Credit Card #	Zip code Exp	o. Date	CVV Code			
(Please make checks	payable to Nativity Pilgrimage) (There is a 5% cha	arge for all credit card pa	ayments)			
Select one option: Charge my DEPOSIT no	w and the balance due 100 days before departure.	Charge my TOTAL trip	p cost now (excludes any	y insurance)		
☐ Check enclosed for DEPOSIT ONLY ☐	Check enclosed for TOTAL trip cost (excluding any	insurance) Charge	DEPOSIT ONLY to my	credit card		
<u>-</u>	d a confirmation email within 2 weeks of registration					
I understand it is my responsibility to obtain any	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.

SIGNATURE:





Safe Travels First Class

International Travel Protection Plan



Plan Highlights

- Comprehensive coverage for trip cancellation, trip interruption, emergency medical and post-departure travel coverage
- Pre-Existing medical condition waiver available
- US residents traveling within the United States and abroad
- Up to \$150,000 in Secondary emergency medical coverage
- Cancel for Any Reason available in most states
- Property Damage coverage available for accommodations
- Rates for AK, MO, and PA are listed on page 3 and all other state rates are listed on page 4

Property Damage

Provides reimbursement for direct physical damage to covered real or personal property within the unit occupied by the insured during the trip.

Cancel for Any Reason

Provides reimbursement for the percentage 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 policy. Must be purchased with initial policy and within 14 days of the trip deposit date, and the full, non-refundable trip cost is insured. *Not available in NY and WA.

Pre-existing Medical Condition Exclusion Waiver

Exclusion is waived if coverage is purchased within 14 days of the initial trip deposit date, and the full, non-refundable trip cost is insured, and you are medically able to travel on the policy effective date.

10-Day Free Look

If you are not satisfied within 10 days of purchasing this plan, Trawick International will refund your premium cost if you have not departed on your trip or filed a claim.

Non-Insurance and Travel Assistance Services

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

Underwritten by:

Benefits listed describe all of the travel insurance benefits, underwritter by Nationwide Mutual insurance Company. There are certain restrictions, exclusions and limitations that apply to all services and coverages. Plan benefits, limits, and provisions may vary by state. To review full plan details online, visit www.trawickinternational.com. You will receive a Certificate of insurance which describes the benefits and limitations in detail including available 24-hour emergency assistance services and for your state of residence.

Plan Admin:

Trawick International (888) 301 - 9289 PO Box 2284 Fairhope, AL 36533 info@trawickinternational.com www.trawickinternational.com