Eastern Europe



Nativity Pilgrimage

13-Day Pilgrimag	e

Dates: September 09 - 21, 2024

Cost: \$4,259 per person

Departure: Round-trip air from Los Angeles

Tour Operator: Nativity Pilgrimage

Phone: 832-406-7050

PRINT NAME:

Email: info@nativitypilgrimage.com





Nativity Pilgrimage	Date	Payment	Check #
Registration Form			
Trip Code = 3505			

For Office Use Only

DATE:_

website: www.nativitypiigrimage.co		Trip Code = 3505						
I understand it is my responsibility PASSPORTS MUST BE VALID AF			for this	trip if I don't hold	d an American Passp	ort.		
I have read and agreed to all the term PLEASE PRINT & ATTACH COP NAMES ON THIS FORM AND PA	Y OF YOUR PASSPOR	T WITH THIS REGI		ION.				
Last name	First name			Middle				
Address		City, State, Zipco	ode					
Phone # (including area code)		Email						
Passport Number	Place of issue			Date of i	ssue			
Expiration date	Date of birth				Gender: M	F		
Emergency Contact (name & phone r	ıumber)							
Special room accommodations								
I want to room with (first &	last name)							
I need a roommate								
I want a single room (at an a								
Please enclose a \$300 per person non-ref copy of passpo	fundable non-transferab ort to: Nativity Pilgrim					oplication and		
Payment Options								
	Master Card			Express				
Credit Card #	I	codeE	-					
(Please make check	ks payable to Nativity Pilg	rimage) (There is a 5% c	harge fo	r all credit card pa	nyments)			
elect one option: Charge my DEPOSIT n	now and the balance due 10	00 days before departure.	Chai	rge my TOTAL trip	cost now (excludes an	y insurance)		
☐ Check enclosed for DEPOSIT ONLY ☐	Check enclosed for TOT	AL trip cost (excluding a	ny insura	ance)	DEPOSIT ONLY to my	credit card		
· · · · · · · · · · · · · · · · · · ·	ved a confirmation email w			•				
I understand it is my responsibility to obtain an valid for 6 months after the scheduled return da						ssports must be		

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