REGISTRATION FORM

Shrines of Mexico

8-Day Pilgrimage

Dates: Oct. 07 - 14, 2024 Cost: \$2,790 per person

Departure: Round-trip air from Atlanta, GA Tour Coordinator: Deacon Richard Schmidt

Phone: 404-670-7628

Email: richard@nativitypilgrimage.com Website: www.nativitypilgrimage.com



For Office Use Only

Date	Payment	Check #



Trip Code = 3664		

	IIIp C	Jule - 3004			
I understand it is my responsibility to obtain any visas/re-entry permit necessary for this trip if I don't hold an American Passport. PASSPORTS MUST BE VALID AFTER 6 MONTHS OF DEPARTURE.					
I have read and agreed to all the term PLEASE PRINT & ATTACH COPY NAMES ON THIS FORM AND PA	OF YOUR PASSPORT WIT	TH THIS REGISTR	ATION.		
Last name F	First name		Middle		
Address	Ci	ity, State, Zipcode			
Phone # (including area code)	Ema	ail			
inone " (mondaing area coa.,					
Passport Number Place of issue Date of issue		issue			
Expiration date	Date of birth			Gender: M	F
Control (many 2 mhonon	1 \				
Emergency Contact (name & phone n	umber)				
Special room accommodations					
I want to room with (first &	last name)				
I need a roommate					
I want a single room (at an a	dditional \$600)				
Please enclose a \$300 per person non-refu copy of passpo	undable non-transferable depo rt to: Nativity Pilgrimage 1				plication and
Payment Options					

Payment Options				
Check Master Card	☐ Visa ☐ American Express ☐ Discover			
Credit Card #	Zip code Exp. Date CVV Code			
(Please make checks payable to Nativity Pilgrimage) (There is a 3% charge for all credit card payments)				

Select one option:Charge	e my DEPOSIT now and the ba	alance due 100 days before depa	arture. [] Charge my TOT A	AL trip cost now (exclude	es any insurance)
Check enclosed for DE	POSIT ONLY	osed for TOTAL trip cost (exclu	iding any insurance)	narge DEPOSIT ONLY t	o my credit card

If you haven't received a confirmation email within 2 weeks of registration, please contact Nativity Pilgrimage.

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.

PRINT NAME: SIGNATURE: DATE:





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