The Shrines of	e Shrines of		For Office Use Only		
Mexico	No	ativity rimage	Date	Payment	Check #
7-Day Pilgrimage	Pilg	rimage /			
Dates: July 4-9, 2024		,			
Cost: \$2,199 per person					
Departure: Round-trip air from Lo	s Angeles				
Tour Operator: Nativity Pilgrimage	· 75%				
Phone: 832-406-7050	260				
Email: info@nativitypilgrimage.com	a (2007)				
Website: www.nativitypilgrimage.co	om 📑				
I understand it is my responsibility PASSPORTS MUST BE VALID A			his trip if I don't ho	old an American Passp	port.
I have read and agreed to all the ter PLEASE PRINT & ATTACH COL NAMES ON THIS FORM AND P	PY OF YOUR PASSPORT WIT	ΓΗ THIS REGISTE	RATION.		
Last name	First name		Middle		
	.'				
Address	C	ity, State, Zipcode	;		
Phone # (including area code)	Ema	ail			
Passport Number	Place of issue		Date of issue		
Expiration date	Date of birth			Gender: M	F
Expiration date	Date of office			Gender. W	
Emergency Contact (name & phone	number)				
Special room accommodations					
I want to room with (first 8	र्थ last name)				
I need a roommate					
I want a single room (at an					
Please enclose a \$300 per person non-re copy of passp	efundable non-transferable dep port to: Nativity Pilgrimage 1				pplication and
_	<u>Payment</u>	Options .		_	
	Master Card Visa		ican Express	Discover	
Credit Card #	_	•		CVV Code	
(Please make chec	cks payable to Nativity Pilgrimage	e) (Inere 18 a 3% charg	ge for all credit card p	payments)	
elect one option: Charge my DEPOSIT	now and the balance due 100 days	before departure.	Charge my TOTAL tr	ip cost now (excludes an	ıy insurance)
Check enclosed for DEPOSIT ONLY [_			·	y credit card
*If you haven't rece understand it is my responsibility to obtain a	ived a confirmation email within 2				assports must be
-1: 1 f - C th ft th th - 1-1	J. L. and T. L. and and and and	. 11 4b - 4	list and a set found it	la la calcana	1

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