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DATE:

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ty	Date	Payment	Check	

Dates: December 7 - 16, 2024

Cost: \$4,699

PRINT NAME:

Departure: Austin, TX

Tour Operator: Nativity Pilgrimage

Phone: (832) 406-7050

Email: info@nativitypilgrimage.com

Website: www.nativitypilgrimage.com



NAMES ON THIS FOR	M AND PASS	OF YOUR PASSPORT WIT SPORT MUST MATCH EX				
Last name	Fii	rst name		Middle		
Address						
Address			ity, State, Zipcode	: 		
Phone # (including area code)		Ema	nil			
Passport Number Place of issue		Date of	Date of issue			
				•		
Expiration date		Date of birth			Gender: M	F
	0 1	1)				
Emergency Contact (name	& phone nui	mber)				
Special room accommoda	tions					
I want to room w		ast name)				
I need a roomma	te	<u>`</u>				
I want a single ro	om (at an ado	ditional \$800)				
Please enclose a \$300 per per		dable non-transferable dep to: Nativity Pilgrimage 1				cation and
		<u>Payment</u>	<u>Options</u>			
Check	Mas Mas	ster Card Visa	Ameri	can Express	Discover	
Credit Card #		1	Exp.			_
	e make checks r	savable to Nativity Pilgrimage) (There is a 3% charg	ge for all credit card p	payments)	

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

SIGNATURE:

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.





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