

CALVARY CHAPEL BIBLE FELLOWSHIP

ISRAEL TOUR APPLICATION

*****Please complete and turn this into the church office**

1. Full name as it appears on your passport: _____

2. Home Phone# _____ Cell Phone# _____

3. Email Address: _____

4. Address: _____

5. Preferred name for ID badge: _____

6. Preferred method of communication: Phone _____ Email _____ Text _____

7. Home church: CCBF _____ Other: _____

8. Traveling with: Spouse _____ Family (how many) _____ Single _____ Friend _____

If traveling with a friend, rooms cannot be shared between single men and women. We also cannot guarantee you a roommate (additional costs may be incurred).

9. Name(s) of people you would like to room with:

All rates are based on double occupancy rooms. More than 2 people are only allowed with parents and their minor children.

10. Medical concerns: No _____ Yes (explain) _____

This is a walking tour. There are numerous stairs and uneven surfaces throughout the course of the trip. Therefore, it is not recommended for anyone with limited mobility.

11. Do you require transportation to and from LAX (it will be an additional cost)? YES NO

12. Please attach a color passport copy to this application and turn in to the front office.

13. Consumption of alcohol and smoking is not permitted while on the tour _____
Initial

Signature: _____

Date: _____

Office Use Only:

Received by: _____

Approved: YES NO

Date: _____

Pastor's Signature: _____