

# REGISTRATION FORM



## Pilgrims' Peace Center

Mailing Address: PO Box 1439, Crystal River, FL 34423  
Phone: 352-564-2463 [pilgrimspeace@mindspring.com](mailto:pilgrimspeace@mindspring.com)

**PILGRIMAGE TO \_\_\_\_\_ ON \_\_\_\_\_, 2010**

**Trip Number: \_\_\_\_\_ *Please PRINT and fill out carefully and completely!***

1. NAME (As it appears on your passport) \_\_\_\_\_
2. Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
3. Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_
4. Email address: \_\_\_\_\_ Occupation (Current or prior to retirement) \_\_\_\_\_
5. Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female. You are a \_\_\_\_\_ Non-Smoker \_\_\_\_\_ Smoker
6. Name or nickname as you would like it to appear on your name tag: \_\_\_\_\_
7. Emergency Contact (Not traveling with you) \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_
8. (a) UNITED STATES PASSPORT NUMBER \_\_\_\_\_ Expiration Date \_\_\_\_\_  
(b) If you have a foreign passport, the country of issue is \_\_\_\_\_ Expiration Date \_\_\_\_\_  
(Persons with passports other than U.S. Passports are responsible for determining whether or not Visas are necessary and, if so, obtaining them.)
9. You plan to room with \_\_\_\_\_. (If you do not have a roommate, one will be assigned to you. A limited number of single rooms maybe available for an additional single supplement cost.)
10. Your nearest major airport is : (City and State) \_\_\_\_\_
11. \_\_\_\_\_ Payment of \$ \_\_\_\_\_ is enclosed by check and made payable to **PILGRIMAGE TOURS, INC.**  
Please charge my \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD: Account Number: \_\_\_\_\_  
Expiration \_\_\_\_\_ Name as it appears on card \_\_\_\_\_  
3-digit security code on reverse \_\_\_\_\_. **(WE CAN ACCEPT VISA AND MASTERCARD ONLY!)**
12. \_\_\_\_\_ I will bring the \$100 tip money (IN CASH ONLY!) and present it upon arrival in Medjugorje. (If I am also traveling to Italy I will bring the additional \$175 tip money (IN CASH ONLY!) for Italy and present it upon arrival in Medjugorje.)
13. \_\_\_\_\_ I understand that Pilgrimage Tours, Inc. and Pilgrims' Peace Center recommend that I purchase a Travelex Protection Plan to protect my trip investment and myself while traveling. I have elected to do the following:  
\_\_\_\_\_ I will contact Travelex Insurance Services at 1-800-228-9792 and purchase a travel protection plan.  
\_\_\_\_\_ I decline to purchase this protection.

I hereby declare that I have carefully read and understand the Terms and Conditions included in this package, which constitute the sole contract between me and PILGRIMAGE TOURS, INC. and PILGRIMS' PEACE CENTER, and that payment sent constitutes acceptance thereof. I further agree for myself, and on behalf of my heirs, and my estate, to protect, indemnify and save harmless PILGRIMAGE TOURS, INC., PILGRIMS' PEACE CENTER, and MICHAEL AND SANDRA TOBIN, their heirs, assigns and representatives, from any and all loss, claims, expenses and attorney's fees, and to accept all liability arising out of or from any possible injuries or death to myself of any member of my family.



Participant's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_