

USA GROUP

Please complete booking form & email to:
groups@travelinkuk.com



Travelink Group Ltd

50 Vivian Avenue
London, NW4 3XH
UK
Tel: +44 208 931 8811

www.toursforchristians.com/tours

A special visit to London and the Holy Land with Jeff & Kay Lucas

Price pp sharing a twin or double bedded room: \$4995.00

Price in a single room: \$6235.00

20 April – 2 May 2018



PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS – THANK YOU

Title	First Name <i>As shown on your passport</i>	Surname <i>As shown on your passport</i>	Date of Birth <i>(dd/mm/yy)</i>	Please ensure you hold a full valid passport with at least 6 months unexpired from the date of your return from Israel.			
				Accommodation		Nationality	Name to be printed on your badge e.g. Chris, Bob etc
				Twin	Single		

Address to whom all correspondence will be sent.

Name:

Address:

Zip code:

Telephone Numbers. Home:

Work:

Cell:

Email address:

Special requests (if any) e.g. Vegetarian, Disabled, Adjoining rooms etc. – We will do our best to meet your requests, but please understand no guarantees can be given.

Should you require a room share we will endeavor to arrange this, but if this proves impractical, then the appropriate supplement will be payable.

TRAVEL INSURANCE - PLEASE COMPLETE THIS SECTION

As your tour operator, we would like to remind you of the importance of adequate holiday insurance. Such insurance should ensure you are fully covered against unexpected cancellation charges, medical expenses rising abroad, losses of luggage or money and personal liability.

My insurers are..... Policy No..... Emergency Tel. Number.....

NEXT OF KIN - PLEASE COMPLETE THIS SECTION

In case of an emergency the contact name and number of your next of kin:-

Name..... Contact Tel. Number.....

Email Address.....

If you do not have a USA passport, you are advised to check with the Israeli Embassy (Consulate Section) for advice on visas. <http://www.israelemb.org/washington/ConsularServices/Pages/consular-services.aspx>

PASSPORT INFORMATION
To be completed for each person

Name	Passport Number	Issue date dd/mm/yyyy	Expiry date dd/mm/yyyy	Passport Country of issue	VISA granted? (if applicable) Answer YES or Waiting

PAYMENT AND DECLARATION

Deposit \$500.00 per person
or the full amount if travelling within 10 weeks \$ _____ Balance due by: 9th February 2018

Non UK residents must obtain insurance in their country of residence

I agree on behalf of all the named persons on this booking form to accept the booking Conditions (available at www.travelinkuk.com or on request) and warrant that I have the authority of all the persons named on the Booking Form to make the booking subject to these conditions. I am over 18 years old.

Signed..... Date.....

TWO PAYMENT METHODS AVAILABLE

PAYMENT – BY BANK TRANSFER	PAYMENT – BY CREDIT CARD IN USD
Please transfer the funds in US DOLLARS directly to our USD bank account. Please instruct your bank to cover all charges. Details below: Barclays Bank Plc Account Name : Travelink Group Ltd Account no : 77350744 Bank sort code : 20-95-61 Swift code : BARCGB22 IBAN : GB08 BARC 2095 6177 3507 44 Please include your surname and tour name 'Jeff Lucas' as a payment reference and advise us by email to: groups@travelinkuk.com .	Credit cards incur a supplement of 3% Card types: VISA, MASTERCARD & AMEX Card Type: _____ Card Number _____ Issue Date: _____ Expiry date: _____ Card Security Code: _____