

**AACI's Chanukah Cruise 2017**  
 Application Form (One form per Cabin)  
**PLEASE COMPLETE IN BLOCK CAPITALS**

I am an AACI Member.    
 YES NO

**PASSENGER 1**

<b>LAST NAME, FIRST NAME as it appears in your passport</b>		<i>Name you're called for nametag?</i>	
<b>Date of Birth</b>	<i>DD/MM/YYYY</i>		
<b>Passport #</b>	<b>Date of Issue</b>		
<b>Country</b>	<b>Date of Expiry</b>		
<b>Email Address</b>			
<b>Mobile #</b>		<b>Home #</b>	<b>Fax #</b>
<b>Home Address</b>			
<b>Dietary Restrictions</b>	<b>CABIN CATEGORY</b>		
<b>Emergency Contact</b>			
<i>Name</i>		<i>Phone #</i>	
		<i>Relationship</i>	

**PASSENGER 2**

I am an AACI Member.    
 YES NO

<b>LAST NAME, FIRST NAME as it appears in your passport.</b>		<i>Name you're called for nametag?</i>	
<b>Date of Birth</b>	<i>DD/MM/YYYY</i>		
<b>Passport #</b>	<b>Date of Issue</b>		
<b>Country</b>	<b>Date of Expiry</b>		
<b>Email Address</b>			
<b>Mobile #</b>		<b>Home #</b>	<b>Fax #</b>
<b>Home Address</b>			
<b>Dietary Restrictions</b>	<b>CABIN CATEGORY</b>		
<b>Emergency Contact</b>			
<i>Name</i>		<i>Phone #</i>	
		<i>Relationship</i>	

**Requested Cabin Category:** \_\_\_\_\_ **Double Occupancy**  **Single Occupancy**  **Single Bed(s)**  **Double Bed**

Would you like to Read Torah  Lead Tefillah  Other  Give a lecture/shiur  Subject:  
 Do you have a special request?

**PASSPORT REQUIREMENTS:** PASSPORTS MUST BE VALID UNTIL AT LEAST June 2018  
 YOUR PASSPORT MUST HAVE AT LEAST TWO EMPTY PAGES FOR VISAS  
**PLEASE SEND A PHOTO COPY OF YOUR PASSPORT WITH APPLICATION FORM**

*I have read and agree to terms and conditions of tour and understand the organizers reserve the right to cancel, alter or change any aspect of the tour without prior notification to the registrant.*  
*I authorize my contact details to be shared with my fellow trip participants and for any photos where I appear to be used for AACI promotional purposes.*

**CANCELTION POLICY:**  
 From registration until Oct 10– 50%. From Oct 11 until date of departure-100% cancelation fee..

**PAYMENT SCHEDULE:**  
 Upon registration 50% due. Oct 11-Full payment due

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_