

**ODESSA**  
**August 6-9, 2018**  
 Application Form

I am an AACI Member.    
 YES NO

**PLEASE COMPLETE IN BLOCK CAPITALS WITH YOUR NAME AS IT APPEARS IN YOUR PASSPORT**

		PASSENGER 1		PASSENGER 2	
<b>LAST NAME</b>					
<b>FIRST NAME</b>					
<i>Name you're called for nametag?</i>					
<b>Date of Birth</b>		<i>DD/MM/YYYY</i>		<i>DD/MM/YYYY</i>	
<b>Passport Country</b>					
<b>Passport #</b>					
<b>Passport Date of Issue</b>					
<b>Passport Date of Expiry</b>					
<b>Email Address</b>					
<b>Mobile #</b>	<b>Home #</b>	<b>Fax #</b>	<b>Mobile #</b>		
<b>Home Address</b>					
<b>Flying with Group</b>					
<b>Kosher Airline Meal</b>	<b>Special Request</b>	<b>Vegetarian</b>	<b>Type of Room</b>	<b>Double</b>	<b>Single</b>
<b>Dietary Restrictions during trip</b>					
<b>Emergency Contact</b>					
<i>Name</i>		<i>Phone #</i>		<i>Relationship</i>	
<b>FORM OF PAYMENT:</b> USD or NIS					
CHECK <input type="checkbox"/>	CASH <input type="checkbox"/>	CREDIT CARD: VISA <input type="checkbox"/>	MASTERCARD <input type="checkbox"/>	AMEX <input type="checkbox"/>	
<b>Credit Card #:</b>				<b>Security Code –</b> <i>3 digits on back of card:</i>	
<b>Expiry Date:</b>			<b>ID #:</b>		
<p><i>PASSPORTS MUST BE VALID UNTIL AT LEAST Feb 2019</i></p> <p><b>YOUR PASSPORT MUST HAVE AT LEAST TWO EMPTY PAGES FOR VISAS</b></p> <p><b>PLEASE SEND A PHOTO COPY OF YOUR PASSPORT WITH APPLICATION FORM</b></p> <p><b>Price per person in double: MEMBERS: € 1,199 NON MEMBERS-AACI members € 1,249 SINGLE SUPPLEMENT € 80</b></p> <p><b>Deposit of 300 Euro per person at time of registration, balance due by May 31, 2018</b></p> <p><i>*Cancellation from time of registration until May 31st 2018: 200 Euro per person.*Cancellation between June 1st until July 17th 2018: 800 Euro* Cancellation from July 18th to day of departure: 100%</i></p> <p><i>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.</i></p> <p><i>Ophir Tours and AACI are not responsible for any damage or loss to personal property during the tour.</i></p>					
<b>SIGNATURE:</b>			<b>DATE:</b>		

**I agree to share my contact details with the group: Yes No**

**PLEASE SEND TO:** JERUSALEM: 03-526-9424, [HENRIETTE H@OPHIRTOURS.CO.IL](mailto:H@OPHIRTOURS.CO.IL) NETANYA: 03-526-1714 [SHARON BE@OPHIRTOURS.CO.IL](mailto:SHARON_BE@OPHIRTOURS.CO.IL)  
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[www.aacitravel.com](http://www.aacitravel.com)

**PLEASE NOTE: THIS TOUR REQUIRES ABILITY TO WALK DISTANCES & CLIMB STAIRS INDEPENDENTLY**