

AACI's 12 Nights Cruise – Mediterranean & Adriatic Seas

Crown Iris

October 22nd – November 3rd, 2019

Application Form (One form per Cabin)

| | | | |
|---|-----------------------|--|---------------------|
| PASSENGER 1 | | I am an AACI Member. <input type="checkbox"/> <input type="checkbox"/> YES NO | |
| LAST NAME, FIRST NAME as it appears in your passport | | <i>Name you're called for nametag?</i> | |
| Date of Birth | <i>DD/MM/YYYY</i> | | |
| Passport # | Date of Issue | | |
| Country | Date of Expiry | | |
| Email Address | | | |
| Mobile # | Home # | Fax # | |
| Home Address | | | |
| Dietary Restrictions | CABIN CATEGORY | | |
| Emergency Contact | | | |
| <i>Name</i> | | <i>Phone #</i> | <i>Relationship</i> |
| PASSENGER 2 | | I am an AACI Member. <input type="checkbox"/> <input type="checkbox"/> YES NO | |

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

Double Occupancy **Single Occupancy** **Single Bed(s)** **Double Bed**

Would you like to Read Torah Lead Tefillah Other :

Do you have a special request? _____

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

PASSPORT REQUIRMENTS: PASSPORTS MUST BE VALID UNTIL AT LEAST May 2020
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. **Ophir Tours and AACI are not responsible for any damage or loss to personal property during this tour.***
CANCELLATION: Cancellation from time of registration until 60 days prior to departure – 200 Euro per person;
 60 days to 30 days prior to departure – EUR300 of the total price per person; 30 days to 14 days prior to departure – 50%. Less than 14 days prior departure – 100%.
PAYMENT: Upon registration and not after 90 days prior to departure – 300 Euro per person; 90 days prior to departure – full payment due.
SIGNATURE: _____ **DATE:** _____

PLEASE SEND TO: JERUSALEM: 03-526-9424, [HENRIETTE_H@OPHIRTOURS.CO.IL](mailto:H@OPHIRTOURS.CO.IL) RAANANA: 09-777-7100, [MARCELLE_K@CWT.CO.IL](mailto:M@CWT.CO.IL) OR
LIA_H@OPHIRTOURS.CO.IL BEIT SHEMESH: 02-991-1474, [DAWN_M@CWT.CO.IL](mailto:D@CWT.CO.IL)

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