

www.pilgrimtours.com

P0 Box 268 • Morgantown, PA 19543 Phone 800.322.0788 • 610.286.0788

Deposit: Your reservation will be confirmed upon receipt of your deposit. \$300.00 for international air tours, and \$500.00 for cruise tours. **Note:** All prices are based on international exchange rates, which are subject to change.

Final Payment: Your balance is due 60 days prior to departure.

Cancellation & Travel Protection: Initial deposit is refundable up to 90 days from departure. Pilgrim Tours requires a \$100.00 service charge for both Israel and China tour cancellation. After final payment is received, the amount refunded is based on penalties imposed by airlines, hotels, etc. Pilgrim Tours recommends that you consider trip cancellation and interruption insurance. Pilgrim offers optional insurance coverage as noted on the back of our itineraries.

Responsibility: Pilgrim Tours & Travel is the principle and is responsible for the arrangements and services described in their brochures. Pilgrim Tours & Travel, its employees and agents cannot be held responsible, in the absence of their own gross neglect, for events over which they have no control, nor for acts and omissions by persons, companies or agencies, including hotels, airlines, restaurants, sea and land transportation companies, which are not directly controlled by Pilgrim Tours & Travel.

Please complete the reservation form and return it with your payment to Pilgrim Tours, PO Box 268, Morgantown, PA, 19543

International Reservation Form - Pl	eas	e Print			
Tour Name: Cost per person: \$					
Date of Tour:	# of Persons		•	If Cruise - Cabin Category	
Deposit (per person):	X	(# of travelers) = \$			
Cost of Insurance (per person): \$	\mathbf{X}	(# of travelers) = \$			
Total Enclosed = \$					
□Check □Mastercard □Visa □American Expr	☐ American Express Cr			Exp. Date	
Name on Credit Card					
FIRST PASSENGER		SECOND PASSI	ENGER (IF PAY	MENT ON TH	IS FORM)
Full Name (as it appears on passport)		Full Name (as it a	,		,
Passport Number:		Passport Numbe	r:		
Issuing country of passport or travel document		Issuing country of passport or travel document			
Date of birth, (M/D/Y) ☐ Male ☐ Fe	male	Date of birth, (M	I/D/Y)	□Male	☐ Female
Your Street Address		Your Street Add	lress		
City State		City	St	tate	
Zip Phone No.		Zip	Phone No.		
Emergency Contact not traveling		Emergency Cont	tact not traveling		
Name:		Name:			
Phone:		Phone:			
Name of Roommate (if on separate form)					

Insurance offered by Pilgrim and understand the cancellation policy. I may purchase insurance from another source.

Insurance premium should be paid at time of deposit.

I also have read and understand Pilgrim Tours' Terms and Conditions and will comply with the policies as stated.