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HOLY LAND REGISTRATION FORM



(All details MUST be filled)

NAME AND OTHER DETAILS SHOULD BE ENTERED AS IN THE PASSPORT. EVEN IF YOU ARE EMAILING THIS FORM TO US, KEEP THE ORIGINAL SIGNED COPY WITH PICTURE AND HAND IT OVER TO THE GROUP LEADER BEFORE THE JOURNEY.

GIVEN NAME / FIRST NAME:		RELIGION:	
SURNAME / SECOND NAME:			
GENDER:		PASSPORT NUMBER:	
MARITAL STATUS:		DATE OF ISSUE:	
AGE:		DATE OF EXPIRY:	
NATIONALITY:		PLACE OF ISSUE:	
DATE & COUNTRY OF BIRTH:		COUNTRY & CITY OF RESIDENCE:	
LAST 5 COUNTRIES VISITED:			
DATE OF PREVIOUS VISIT TO ISRAEL:			

ADDRESS AS IN PASSPORT:	PRESENT ADDRESS:	EMAIL:	
		LANDLINE:	
		MOBILE NUMBER:	
		OCCUPATION:	
		DESIGNATION:	
		PLACE OF WORK (Company name etc.):	
Food preferences will be noted; this will depend on availability and is not guaranteed.			
ANY FOOD ALLERGIES?		VEGETARIAN?	

IS ANY OF YOUR FAMILY MEMBERS TRAVELLING WITH YOU?			
NAME	RELATIONSHIP	PHONE	EMAIL
1)			
2)			
3)			
4)			

DO YOU HAVE ANY RELATIVES OR FRIENDS IN ISRAEL?			
NAME	RELATIONSHIP	PHONE	EMAIL
1)			
2)			

EMERGENCY CONTACT:NAME	MOBILE:	EMAIL:	LANDLINE:

AMOUNT	DATE	PAYMENT MODE	DETAILS

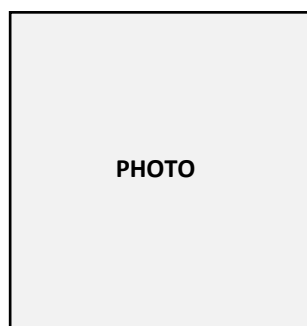
PLEASE PROVIDE THIS REGISTRATION FORM ALONG WITH PASSPORT COPY (FIRST PAGE AND LAST PAGE)

Disclaimer: I hereby declare that the information furnished above is correct, accurate, complete and non-misleading. It will be my responsibility to be with the group and return along with the group. I will be solely responsible for all the losses arising from parting the group and hereby authorize the company to recover all the dues and penalty of Rs.12 Lakhs from me and my family in case I am not returning back with the group.

SIGNATURE:

NAME:

DATE:



NO:	OFFICE USE ONLY
Group	
Date	