## RESERVATION FORM

## The Holy Land Experience

March 6-March 16, 2024
Or
October 23-November 2,2024

Holy Land \$3, 575/person

All airfares are included but subject to change or final booking of airline passengers.
REQUIRED Non-Refundable DEPOSIT PER PERSON: \$ 375
You may pay the \$375 per persondeposit by checkorcash PLEASE MAKE ALL CHECKS PAYABLE TO: "Hearts Aflame"

Please Mail This Completed Form with Your Payment to:
Hearts Aflame Discipleship Journeys
C/O Steve Thigpen
850 Mockingbird Drive
Harrisonburg, Va. 22802
Contact: Steve Thigpen (540) 746-3207
Email: heartsaflameinfo@gmail.com
Name (on passport):
Name to use for Name Tag: $\qquad$ * Roommate: $\qquad$
Address: $\qquad$
City: $\qquad$ State: $\qquad$ Zip: $\qquad$
Telephone: $\qquad$ ) Email Address: $\qquad$
Please send a Copy of Your Passport with reservation form when available.
Room Required: _ Twin Occupancy _ Single Occupancy (Extra charge \$665)
Trip Preference $\qquad$ March 2024
_ October 2024

## Inclusions:

## *8 Total Nights

*Accommodation 4 nights Tiberius Hotel
*Accommodation 1 night Oasis Hotel Jericho
*Accommodation 3 nights Grand Court Hotel Jerusalem
*Airfare TBD Airlines from Dulles Int. thru Newark or JFK to TLV \& Return
*First Class Coach Transportation for 9 days sightseeing
*6 Lunch's included: Nazareth Church, 2-TBD, Fish Lunch at Ein Gev, Jericho \& Bethlehem
*Half Board all other days Buffet Breakfast \& Dinners
*Guides: Local TBD \& Pastor Kerry Willis
*All Entrance, Porterage \& Guiding Fees
*Whisper sets

Not Included:
*Personal expense such as beverages, medical and insurance
*Souvenirs
*2 Lite Lunches
*Any Covid Testing (TBD prior to Trip)

## Insurance:

You may purchase trip cancellation insurance from the Travel Company for $6.4 \%$ per $\$ 1000$ or purchase on your own insurance. Required to have at least 10 if purchased thru the Travel Company.

## FORM OF PAYMENT

Payment is for the following Persons:


I have enclosed a Deposit of $\$$ $\qquad$ Per Person, for a Total Check or Cash amount of \$ $\qquad$

