

**ISRAEL TRIP – REGISTRATION FORM  
I Will Be Joining Pastor Chris on the  
PILGRIMAGE TO ISRAEL!**

**MAY 17 – 27, 2010**

**NAME** \_\_\_\_\_  
(as it appears on your passport)

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_ **CELL** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

**AGE** \_\_\_\_\_ **OCCUPATION** \_\_\_\_\_ **SMOKER** \_\_\_ **YES** \_\_\_ **NO**

**ROOMMATE NAME** \_\_\_\_\_

**I PREFER A SINGLE ROOM FOR AN ADDITIONAL \$598** \_\_\_\_\_

**ENCLOSED IS MY CHECK FOR MY DEPOSIT (\$300/PERSON)** \_\_\_\_\_

**Make checks payable to: AMI TRAVEL ESCROW ACCOUNT**

**Travel insurance information will be sent to you with a receipt for your deposit.**

**I have read the Responsibility and Consumer Disclosure section of this brochure and understand the cancellation policy. I understand payment is due in full by April 1, 2010. I also understand that I am responsible for adequate personal and medical insurance.**

**Signed** \_\_\_\_\_

**Mail this form and deposit to:  
Pastor Chris Manke  
St. Matthew's Ev. Lutheran Church  
1615 Wauwatosa Avenue  
Wauwatosa, WI 53213**