BLUE DIAMOND TRAVEL

# The Israel Experience Registration Form

*The Israel Experience | February 13–23, 2027*

$5,325 Israel tour | $1,950 Petra Extension | $500 deposit due within 10 days

## Traveler Information

| | | |
|---|---|---|
| **Legal name exactly as shown on passport** | **Middle** | **Last** |
| **Address** | **City** | **State and ZIP** |
| **Phone** | **Email** | **Billing email** |
| **Gender** | **Date of birth** | **Age** |
| **Passport number** | **Expiration date** | **Name for badge** |

## Rooming and Accessibility

Roommate name: _____ Beds requested: ☐ One king ☐ Two twins

Israel room: ☐ Double occupancy ☐ Private room (+$1,500) ☐ Please try to match me with a roommate of the same gender.

Petra Extension: ☐ Yes (+$1,950) ☐ No Petra room: ☐ Double occupancy ☐ Private room (+$600)

Emergency contact name and phone: _____

Dietary restrictions or allergies: _____

Mobility or accessibility information: _____

## Payment Schedule

| Payment | Amount | Due |
|---|---|---|
| Deposit | $500 per person | Within 10 days of registration |
| 50% trip payment | 50% of selected trip cost | November 13, 2026 |
| Remaining balance | Balance due | January 13, 2027 |

## Payment Method

☐ Check or money order enclosed: $_____ ☐ Credit card: charge $_____

Credit-card processing fee: $25 for the deposit and $150 for the remaining trip payments, for a maximum total fee of $175 per person.

Card number: _____ Expiration: _____ CVV: _____

Name on card: _____ Billing ZIP: _____

Mail checks or money orders to Blue Diamond Travel, P.O. Box 242058, Little Rock, AR 72223. Pay online at www.thegreatesttrip.com or call 501-416-3320.

## Acceptance

☐ I have read and accept the Tour Conditions. I understand that $300 of the deposit is nonrefundable.

Traveler signature: _____ Date: _____