

Enrollment Form

Bnai Zion 100th Anniversary Mission to Israel
June 23 - July 3, 2008

\$3,249 Per Person from New York based on double occupancy

\$3,568 Per Person from Los Angeles based on double occupancy

Excluding \$210 taxes, subject to increase

I/we would like to register for the BZ 100th Anniversary Mission to Israel June 23-July 3, 2008.

First Name	Last Name	Date of Birth	Passport No.	Date of Issue	Where Issued	Place of Birth

Mailing Address: _____

Phone Numbers / Office: _____ Mobile: _____

Home: _____ Email address: _____

_____ I opt for the Single Supplement at **\$725** additional

Enclosed please find:

_____ Check for deposit in the amount of \$ _____ (see Terms & Conditions)

_____ Check for full payment in the amount of \$ _____

Make check payable to Bnai Zion.

_____ Please charge my credit card \$ _____.

___ Visa ___ Mastercard ___ American Express ___ Discover

Card Number: _____ Expiration Date: _____

Signature: _____ Name as it appears on card: _____

I authorize Bnai Zion Foundation to charge the above credit card in the amount indicated for the transportation and/or related charges for the above-named tour. I understand that the amount charged to my credit card account will be reflected on my credit card statement within **three days** of authorization.

Special requests (to be requested but not guaranteed): _____

Are you or any accompanying persons members of El Al's Matmid Program? _____

Name: _____ Matmid Membership Number: _____

Send check, reservation form and **a copy of each participant's passport to:**

Bnai Zion Foundation

136 East 39th Street • New York, NY 10016 • 212 725 1211 or 800 564 6399

I have read and accept the terms and conditions on the reverse side of this form.

Signature: _____ Date: _____

Full payment is due May 8, 2008. Travel documents will be sent to you approximately two weeks prior to departure.

Please note: No application will be processed unless form is filled out completely.