



Washington National Cathedral

**PILGRIMAGE REGISTRATION FORM
HOLY LAND • JULY 25 – AUGUST 6, 2022**

GENERAL INFORMATION

NAME _____
as it appears on your passport

TITLE *circle one*

MR. MRS. MS. REV. DR. OTHER _____

NICKNAME _____
if you go by a name other than the one on your passport

ADDRESS _____

GENDER _____

PHONE _____

EMAIL _____

MOBILE _____

Will you have your mobile on the trip? YES NO

ROOM INFORMATION

If you don't have a roommate and would be willing to share a room, we will attempt to match you with another pilgrim. If this is not possible, you may be charged an additional fee.

DOUBLE ROOM

Sharing a room with _____
optional, if you do not have a preferred roommate, one will be assigned

SINGLE ROOM

There is a \$540 supplemental fee and limited availability for single rooms

AGREEMENTS

By initialing and signing below, I confirm that I understand the following:

- I must have a valid passport to travel to Israel and my passport must be valid for a minimum of 6 months beyond the duration of my stay (through February 2023). **INITIAL HERE** _____
- Moderate walking, including carrying my luggage for short distances, is part of this pilgrimage. **INITIAL HERE** _____
- Pilgrims are required to have international medical insurance and travel insurance. **INITIAL HERE** _____
- My registration includes a non-refundable \$700 deposit. I agree to make payments per the schedule in the itinerary. **INITIAL HERE** _____
- Should I cancel my participation, I must notify Washington National Cathedral in writing and understand that refunds will be determined by the schedule in the itinerary. In case of cancellation or postponement by the Cathedral or Qumri Pilgrimages, I understand that refunds will be determined by the schedule described in the itinerary. **INITIAL HERE** _____

SIGNATURE _____

Please complete payment information on reverse of form.

PAYMENT INFORMATION

Your registration is not complete until you have made your \$700 non-refundable deposit. Please attach a check (payable to Washington National Cathedral) or complete the payment information below. To pay by credit card via phone, please call 202.537.2221. We are sorry we are unable to process American Express credit cards.

PAYMENT AMOUNT FULL (\$4,000) DEPOSIT (\$700)

SINGLE ROOM, IF APPLICABLE (\$540)

CREDIT CARD NUMBER _____

EXPIRATION DATE _____

NAME ON CARD _____

SIGNATURE _____

Please scan this form and email to pilgrimages@cathedral.org or mail to Washington National Cathedral, ATTN Box Office/, 3101 Wisconsin Ave., NW, Washington DC 20016-5098.

