## **Pilgrimage Registration Information**

Trinity Tour Pilgrimage -- Spring 2023 To register for our pilgrimage please provide the information below. We do promise to keep your information private and will share it only as needed for making hotel reservations and to obtain entrance/exit visas and etc. Registration also requires \$250PP deposit to Trinity Church, Sarnia.

	Person #1	Person #2 (ie. spouse/sharing room)
NAME(S)		
First & Last Name:		
Title:	Mr. Mrs. Ms. Miss. Dr. Other:	Mr. Mrs. Ms. Miss. Dr. Other:
PASSPORT INFO		
Passport Country of Issue:		
Passport Number:		
Surname: (exactly as in Passport)		
Given Names: (exactly as in Passport)		
Nationality:		
Date of Birth: DD/MM/YYYY		
Gender:	Male Female	Male Female
Place of Birth:		
Passport Issued: DD/MM/YYYY		
Passport Expiry Date: DD/MM/YYYY		
CONTACT INFORMATION		
Home Phone #:		
Mobile Phone #:		
WhatsApp # (if different from Cell)		
Work Phone (if applicable)		
Email Address		
Emergency Contact (not in our group)		
Emergency Contact Cell Number		
0.5	Please indicate prefered telephone number with "*".	
HOME ADDRESS		
Number and Street		
City		
Province		
Postal Code		
Vaccination Status		
Are you fully vaccinatied for Covid-19?		
Have you received a booster (3rd dose)		
	International Travel requirments require all partici	pants in our pilgrimage be fully vaccinated for Covid-19.
OTHER INFORMATION		
Church Affiliation		
Parish		
Pastor/Priest's name		
PARTICIPATION DESIRED		
Jordan extension (prequil)	YES NO	YES NO
Primary Pilgrimage	Dates to be confirmed	Dates to be confirmed
Jerusalem Extension	YES NO	YES NO
Hotel Request	□ Twin Share OR □ Single Supplement	□ Twin Share OR □ Single Supplement
Requested Room mate		
	If you request Twin Share we will ende	avour to introduce you to a suitable roomate.
OTHER		
How did you hear of us?		
Position/Profession (If retired indicate)		
Have you been to the Holy Land before?		
Pertinent Health Concerns		
Pertinent Dietary Requirements		