

ISRAEL & ITALY

DON HORBAN

**FEBRUARY
12 TO 23**

2010

| | | |
|------------------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------|
| NAME (last) <small>(AS IT IS OR WILL BE ON YOUR PASSPORT)</small> | NAME (first) <small>(AS IT IS OR WILL BE ON YOUR PASSPORT)</small> | NAME (middle) <small>(AS IT IS OR WILL BE ON YOUR PASSPORT)</small> |
| NAME YOU GO BY <small>(AS YOU WANT IT ON YOUR NAME BADGE)</small> | ADDRESS | CITY |
| PROVINCE | POSTAL CODE | PHONE NUMBER |
| BIRTHDAY | SPECIAL MEAL NEEDS | ANY MEDICAL ALERT |
| NATIONALITY | PASSPORT # | PASSPORT EXPIRY DATE |
| EMERGENCY CONTACT NAME | CONTACT RELATIONSHIP TO YOU | EMERGENCY CONTACT PHONE |
| DESTINATION ITALY AND ISRAEL | DEPART DATE AND TIME FROM CANADA FEB. 12, 2010 | AIRLINE AND FLIGHT # |
| SHARING A ROOM WITH | ARRIVAL DATE AND TIME IN CANADA | AIRLINE AND FLIGHT # |

EMAIL -

PLEASE REGISTER ME: with a \$200.00 deposit Payable to: KeyWorld Travel
ENCLOSED IS MY CHEQUE # _____ FOR \$200.00 AS A DEPOSIT ON THIS TOUR Or
CHARGE MY Credit Card # _____ exp. ____/____

Signed _____ Date _____

\$200.00 PAYABLE UPON REGISTRATION

(This deposit is refundable up to 60 days before departure if you must cancel)

OCTOBER 02, 2009 - \$1000.00
NOVEMBER 15, 2009 - \$1000.00
JANUARY 02, 2010 - \$1695.00 OR BALANCE IS DUE

Don Horban
Box 969
Swan River, MB
R0L 1Z0

KeyWorld Travel
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Calgary, AB
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