

“2012 SHALOM HOLY LAND TOUR”

June 4-14 2012

From New York - \$3499

NOTE: PLEASE PRINT

DATE: _____

(Name you have on your passport)

NAME: _____ D.O.B. ____ / ____ / ____

NAME: _____ D.O.B. ____ / ____ / ____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL: _____

E-MAIL: _____

FORM OF PAYMENT: CHECK / CASH / CREDIT CARD

(There will be a 3% surcharge on all credit card payments)

AMOUNT OF PAYMENT: \$_____

(Deposit minimum - \$100 per person)

CREDIT CARD: VISA MASTER CARD DISCOVER

NUMBER: _____ (Enter number without spaces)

EXPIRATION DATE: _____ SEC. CODE _____

NAME ON CARD: _____

(Signature)

BILLING ADDRESS:

(If different from above)

Please make check payable to:
Davis College

Telephone: (607) 729-1581 x403
lellis@davisny.edu

Mail checks to:
Attn: Larry Ellis
400 Riverside Drive
Johnson City, NY 13790