Friends of JNF Canada WOMEN FOR ISRAEL MISSION

To be completed by each individual (PLEASE PRINT)



November 12 - 19, 2025 | Registration Form

Family Name: _____ ___First Name: ____ Name as appears on Passport (PLEASE PRINT): _____
 Address:
 ______ Province:
 Postal Code:
 Home Phone: () Cell: () Date of Birth: DD/MM/YYYY ______ Occupation: _____ Number: Expiry: DD/MM/YYYY Passport Country:____ Passport must be valid 6 months past return to Canada (i.e. after May 19, 2026). A copy of photo page is required. Email:___ Price: \$4,599 U.S. Land only, double occupancy, Single supplement: \$1,315 Please "✓" the appropriate Boxes: Land only Package - (double occupancy) sharing with: Single Supplement - additional \$1,315 USD I understand that it is my responsibility to arrange my own flights to and from Tel Aviv and transfers upon arrival at the airport and departure to the airport. I herewith enclose my deposit \$1,200.00 USD payable to the Friends of JNF Canada. Payment can be made by cheque, money order or credit card. When paying by credit card, I understand that a 2.6% administration charge will apply. I understand that I am responsible to take out a full comprehensive insurance package and complete an insurance waiver which Friends of JNF Canada will provide. I will submit an additional deposit of \$1200 by September 20, 2025 and the balance of payment by October 1, 2025. Payment - \$1,200 USD deposit required with registration Visa MasterCard USD Credit Card Cheque on U.S. dollar account or bank draft (Payable to the Friends of JNF Canada) Credit Card # _____ Expiry Date _____ CVV____ ______ Signature: _____ Date:

