

# Friends of JNF Canada

## MISSION TO ISRAEL | Registration Form



**Nov. 3-10 , 2026 | MEN'S MISSION**

To be completed by each individual (PLEASE PRINT)

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Name as appears on Passport (PLEASE PRINT): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Date of Birth: DD/MM/YYYY \_\_\_\_\_ Occupation: \_\_\_\_\_

Passport Country: \_\_\_\_\_ Number: \_\_\_\_\_ Expiry: DD/MM/YYYY \_\_\_\_\_

Passport must be valid 6 months past return to Canada (i.e. after May 3, 2027). **A copy of photo page is required.**

Email: \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Please " X " the appropriate Boxes:**

\$4875.00 USD

\$1,200 USD (Single supplement)

**I understand I must carry travel insurance**

**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. The balance of payment is due by Oct. 1, 2026.

**Payment - \$1,200 USD deposit required with registration**

Cheque on U.S. dollar account or bank draft  
(Payable to the Friends of JNF Canada)

Visa

MasterCard

USD Credit Card

Credit Card # \_\_\_\_\_ Expiry Date \_\_\_\_\_ CVV \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_