

Friends of JNF Canada

MISSION REGISTRATION FORM



Mission Name: **Young Leaders Mission**

Mission Dates: **July 15-22, 2026**

To be completed by each individual (PLEASE PRINT)

Family Name: _____ First Name: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Home Phone: (____) _____ Cell: (____) _____

Email: _____

Date of Birth (DD/MM/YYYY) _____ Occupation: _____

Name as appears on Passport (PLEASE PRINT): _____

Passport Country: _____ Number: _____ Expiry (DD/MM/YYYY) _____

Passport must be valid 6 months past the return date to Canada. **A copy of the photo page is required.**

Emergency Contact: Name _____

Relationship _____ Phone: _____

- **Price:** \$1,000 USD Land only (Double occupancy) for Roots Society Members (donations of \$1,000+)*
\$1,200 USD Land only for Sabra Society Members (donations of \$360+)*
Single supplement: \$1,150 USD additional

**The donation has to be paid prior to the mission and is in CDN dollars.*

Please " ✓ " the appropriate Boxes:

Land only (Double occupancy) - Sharing with: _____

Single Supplement

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.

Payment - \$650 USD deposit required with registration. The balance of payment is due by June 15, 2026.

Enclose a deposit \$650.00 USD payable to the Friends of JNF Canada. If paying by credit card, a 2.6% administration charge will apply.

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

Visa

MasterCard

USD Credit Card

Credit Card # _____ Expiry Date (MM/YY) _____ CVV _____

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.

Date: _____ Signature: _____