Friends of JNF Canada
MISSION REGISTRATION FORM

Mission Name: **Women for Israel Mission to Israel** Mission Dates: **November 18-26, 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 (i.e. after May 27, 2027). **A copy of the photo page is required.**

Emergency Contact: Name_____ Are you an Israeli ciziten?* Yes / No

Relationship _____ Phone: _____

Price: **$3,699 USD** Land only for Double occupancy | **$1,600 USD** for Single supplement

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 - $1,200 USD deposit required with registration. The balance of payment is due by October 15, 2026.
Enclose a deposit $1,200 USD payable to the Friends of JNF Canada. If paying by credit card, a 2.6% administration charge will apply.
*18% VAT will be added to the final mission cost for Israeli Citizens.

☐ 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: _____

FRIENDS OF JNF CANADA

For more information, please contact Elana Carr at
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