



**MAGNIFICAT
TRAVEL**
HOLYTRAVELS.COM

In the Footsteps of
Pte. Madeleine Sophie Barat
Pilgrimage to France
October 14 - 23, 2010

PILGRIM REGISTRATION

For International Trips: Please use names as they appear, or will appear, on your passport & send us two copies of your passport.
For Domestic Trips: Please use legal names as they appear on a government issued picture ID (i.e driver's license, passport, etc.)

Legal Last Name Legal First Legal Middle Nationality & Passport No.

Title/Prefix (Mr, Fr, Sr, etc.)	Nick Name/Common Name (Name that you prefer to be called by if different from your legal name)	Suffix (Sr. Jr. III etc.)	I'm a Chaperone/Leader <input type="checkbox"/> Yes <input type="checkbox"/> No (For Student Trips Only)
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Mailing Address (Suite/Apt. No.) City State Zip Code

E-mail	I prefer to receive correspondence via: <input type="checkbox"/> E-Mail <input type="checkbox"/> Standard Mail
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Home Phone No. Work Phone No. Cell Phone No.

Birthday (M/D/Y): Gender: T-shirt Size:

Church Parish:	Have you traveled with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No	I heard about this trip through: <input type="checkbox"/> Friend or Family Member <input type="checkbox"/> Church Bulletin/Announcement <input type="checkbox"/> Website <input type="checkbox"/> Advertisement <input type="checkbox"/> Regular Mail <input type="checkbox"/> Electronic Mail <input type="checkbox"/> Other: _____
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MEDICAL INFORMATION

Are you diabetic? Yes No Are you a smoker? Yes No

Emergency Contact Person's Name & Phone No.

Do you have any allergies to any medications or food? No Yes, please list:

Do you have any medical conditions that we should know about in case of an emergency? No Yes, please list:

Do you have any medical conditions that would either limit or restrict your ability to participate on this trip? No Yes, please list:

PAYMENT OPTIONS & INFORMATION

Deposit: \$500.00 (Non-refundable)	Room Occupancy Selection: <input type="checkbox"/> Single (+\$675) <input type="checkbox"/> Double (included)
Total: \$2750.00 + Taxes & Fees*	Requested Roommate(s):

*Estimated Taxes & Fees (\$300-\$450) We accept cash, money orders, checks, and credit/debit cards. If paying by check, please include the name of the trip in the memo section. If paying by credit/debit card, please fill out the form below.

Card Number	Expiration Date (MM/YYYY)
<input type="text"/>	<input type="text"/>

Name as it Appears on Card	Billing Street Address # Only	Billing Zip Code
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Amount to be Paid	V-Code**	**V-Code: 3 or 4 digit # located on the back of your card in the signature field (Visa & MC) or on the front above your card # (Amex)
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I would like AutoPay: Remaining credit/debit card payments will run automatically up to 2 days prior to due dates.



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TRIP CANCELLATION/INTERRUPTION INSURANCE

Trip cancellation/interruption insurance is strongly recommended and is not included in your package. It is important to understand that if special circumstances arise prior to departure, (such as illness, jury duty, death in the immediate family, etc.) you may receive a refund for conditions covered under your policy only if enrolled in a trip cancellation/interruption insurance program. Trip cancellation/interruption insurance will also cover extraordinary circumstances while on pilgrimage (lost baggage, delays, illness, etc.). **Claims and refunds are handled by Travelex Insurance Services. Magnificat Travel will not issue any refunds after 46 days prior to departure.** Please see Booking Conditions and Travelex brochure for more details as well as for information concerning pre-existing conditions and special circumstances.

You can purchase insurance from Travelex via mail, fax, phone, or online at www.holytravels.com. Be sure to use our location # 18-8870 to identify yourself as part of our group. Insurance must be purchased within 21 days of deposit to cover pre-existing conditions.

TERMS & CONDITIONS AGREEMENT (MINORS UNDER AGE 18)

If participant is less than 18 years of age at the time of travel: Minors must have a parent/legal guardian read and agree to the terms and conditions for travel. All minors must be accompanied by an adult whom has agreed to accompany minor. In some cases this adult is the group leader. Please fill out the additional required information below.

Parent/Legal Guardian's Name	Parent/Legal Guardian's Best Contact Phone No.
Minor's Grade Level	Name of Adult Accompanying Minor

I am the parent or legal guardian of the above (minor) applicant. I have completely read and fully understand the "Release and Agreement" and "Booking Conditions" as supplied herewith, and agree to be bound hereby, and to cause the above applicant to comply therewith.

Signature of Parent or Legal Guardian _____ Date _____

TERMS & CONDITIONS AGREEMENT (ALL PARTICIPANTS)

All participants: I have completely read and fully understand the "Release and Agreement" and "Booking Conditions" as supplied herewith, and agree to be bound hereby, and to comply therewith.

Signature of Participant _____ Date _____

TO COMPLETE REGISTRATION

Please keep the terms & conditions for your records and mail your signed and completed registration form along with your deposit to:

**Magnificat Travel
PO Box 4801
Lafayette LA, 70502**