Please Mail Reservation & Payments to: **All Star Travel Inc. 111 Pearse Rd. Swansea, MA 02777**

Reservation Application *(1 per household please)*

The Holy Land with Rev. Craig A Pregana September 3-13, 2009 @ $2,749 pp

Last Name/First Name, Middle Name as it appears on passport	*Date of Birth*	*US Passport #*	*Passport Exp.*
1			
2			
3			
4			
5			

Address _____ City _____ State _____ Zip _____

Home Tel # _____ Work/Cell # _____

E-mail (s) _____ Business Class Upgrade: ☐One way($1,450) ☐Round Trip($2,900)

Special Meal Request: _____ Airline Seating Request: _____

Roommate Request: _____ ☐Single Room @ $550 *(additional cost)*

Travel Insurance will automatically be billed unless declined. 206 Tours strongly recommends travel insurance.
for details or visit www.206tours.com/insurance. You must initial here to **decline** travel insurance _____

MAKE CHECKS PAYABLE TO: All Star Travel Inc.

Payment by Check enclosed is, $529 per person (deposit and insurance) x _____ people = $ _____ (Full payment required 60 day prior to departure)

Signature _____ **Date** _____

Enrollment in/payment for this tour constitutes your acceptance of all terms and conditions as stated on the reverse page

Additional Comments

_____

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