

ISRAEL TRIP APPLICATION FORM (Non USA departures)

Dates: March 15-27, 2019

Cost: \$1,550* USD per person excluding airfare

By signing this, you agree to all of the following. Please read carefully!

- This trip is reserved exclusively for WOLBI students, alumni, and staff.
- Your signature below constitutes a commitment to participate in the Israel trip at your expense.
- This is NOT a ministry trip but rather a personally-funded enrichment trip. As such, tax-deductible donations cannot be raised in the name of Word of Life to cover its cost.
- If you are a WOLBI student, the cost of this trip cannot be added to your student bill. Students with large outstanding balances on their student bill may be denied participation in the trip.
- A \$250 non-refundable reservation fee will be payable to Word of Life no later than **November 30, 2018**. This will be applied to the cost of the trip. Half the remaining cost (\$650) will be payable to Word of Life no later than **January 11, 2019**. The remaining balance (\$650) will be due no later than **February 8, 2019**. Only one of these installments may be reimbursed up to two weeks before departure. All payments may be made in cash, check to *Word of Life*, or credit card at <https://home.wol.org/biblei/payment.php>. Select the "Israel Trip - BI" option.
- Space is limited and applications will be honored on a first-come, first-served basis upon receipt of the \$250 reservation fee. Once space has been filled, applicants will be placed on a waiting list.
- Airfare is NOT included in the cost of the trip for participants making their own flight arrangements.
- Mandatory liability and medical insurance IS included in the cost of the trip.
- A passport with an expiry date no earlier than September 30, 2019 will be required by **January 11, 2019**. This is the responsibility of all trip participants and is NOT included in the cost of the trip.
- If applicable, classes missed due to participation in this trip must be made up by arrangement with the academic office! 😊

Signature

Date

Print name: _____
(If you have a passport, fill in your full name as it appears therein)

Do you have a passport? Yes No

Date of birth: _____

Passport number: _____

E-mail address: _____

Issuing country: _____

Cell phone number: _____

Expiry date: _____

Box number: _____

Date/time received with \$250 fee: _____

To be turned in to the WOLBI office with \$250 non-refundable deposit no later than November 30, 2018.

* Price listed is for multiple occupancy (3-5 people per room). For double occupancy, add \$125 USD per person.

