



Israel Office:
 Keshet – The Center for
 Educational Tourism in Israel, Ltd.
 33 Pierre Koenig St., P.O Box
 Jerusalem 91084, Israel
 Tel: +972 2 671 3518
 Fax: +972 2 671 3624
 www.keshetisrael.de

USA Office:
 Educational Encounters
 International, Inc.
 180 East Prospect Ave #142,
 Mamaroneck, New York 10543
 USA
 Tel: +1 914 772 42 60
 Fax: +1 914 630 28 15



International Office:
 Operation Exodus
 Ebenezer House
 5a Poole Road
 Bournemouth, BH2 5QJ
 ENGLAND
 Tel: +44 (0)1202 294455
 www.operation-exodus.org

THE ISRAEL PROJECT 09

BOOKING CONDITIONS & REGISTRATION FORM

16th to 30th July 2009

Please read the **BOOKING CONDITIONS** and then complete, sign and return this 2 sided registration form by either fax +1 914 630 28 15 or mail to: Educational Encounters, International, Inc. 180 East Prospect Ave #142, Mamaroneck, New York 10543 USA. **(ALL payments and booking forms will be handled by Keshets', USA office. (EElI))**

Include a \$200 deposit (US dollar) per person, payable to: Educational Encounters International, Inc. (If paying by check or banker's draft) .

Include a photocopy of your passport details. Your passport must be valid through January 16, 2010. *(If you are renewing/applying for a passport please complete and submit the registration form with the deposit and forward the missing information later).*

Your details must be spelled exactly as it appears on your passport. UK., US. and Canadian passport holders do not need a visa to enter Israel. *For other nationalities, check with the nearest Israeli consulate*

Please include any special health or dietary considerations including physical limitations and allergies etc.

This tour will **ONLY** be conducted in English, therefore participants will need a good command of English.

CONTACT DETAILS (As on your Passport) (Please print in BLOCK LETTERS)

First Name _____ Last Name _____ Date of Birth _____
 Address _____
 Town _____ County _____ ZIP/Postcode _____
 COUNTRY _____ PASSPORT NO. _____ Expiry Date _____
 Tel No. Day _____ Evening _____
 Email _____ Marital Status _____

EMERGENCY CONTACT

Name _____ Address _____
 _____ Phone No. _____

HEALTH

Do you have any pre – existing medical conditions? Yes No
 If Yes, please give details _____

 Do you have any special dietary requirements? Yes No
 If Yes, please give details _____

ACCOMMODATION

Room Type _____ If you are travelling with a friend and want to share a twin room please add their name: _____
 Twin _____ Single* _____ *Single supplement surcharge \$450

TRAVEL INSURANCE**Have you purchased travel insurance?** (see note 7)Yes No **PAYMENT DETAILS****Please tick what you wish to pay –** Deposit of US \$200 per person (This will be deducted from your final payment) \$ _____ Full Amount of US \$1290 (Full payment is required if travelling within 8 weeks) \$ _____Single room supplement – Yes No \$ _____

Please make checks or bankers' drafts payable* to Educational Encounters International, Inc or fill in your credit/debit card details below (*Payable in US dollars)

TOTAL AMOUNT \$ _____**CARD DETAILS**

First Name _____ Last Name _____

Card Billing Address _____

_____ Zip/Post code _____

Phone Number _____ Email _____

Please Debit my MasterCard Visa Visa Debit

\$ _____

NOTE there will be a 3% charge for credit cards.Card No Valid from / Valid to / Security Code (last three digits on back of card)Name on card Signed Date / / **TERMS AND CONDITIONS**

I agree to accept the booking conditions and I acknowledge that they contain certain exclusion clauses.

Note: Bookings will only be accepted by persons over 18 years of age.**Name****Signature****Date** / / **REFERENCE**

Please provide an email address or contact address details of your Pastor/leader to act as a referee.

PLEASE RETURN THIS PART OF THE FORM TOEducational Encounters
International, Inc.
180 East Prospect Ave
#142, Mamaroneck,
New York 10543
USA***If paying by card you can Fax your form to +1 914 630 28 15***

THE ISRAEL PROJECT — BOOKING CONDITIONS

(Please keep for your records)

1. BOOKING FORM

Your contract is with Keshet: The Center for Educational Tourism in Israel, Keshet/Educational Encounters International, Inc. EEII. The contract comes into force only when we have accepted a registration by the issue of a written confirmation or invoice.

2. PAYMENT

A deposit of US\$ 200 per person is payable at the time of registration. An invoice for the balance of the cost of your trip will be sent approximately 10 days after the registration form has been received and must be paid in full at least eight weeks prior to departure. For bookings made within eight weeks of departure, full payment is due with the booking form. If for any reason the balance is not received by us by the due date, we reserve the right to treat your booking as cancelled and levy the applicable cancellation charges.

| | |
|------------------------|--|
| At registration | Deposit of \$200 per participant (applied to total payment) |
| May 16, 2009 | Payment due in full |

Bank wiring instructions:

Chase Bank
1350 Boston Post Road
Larchmont, NY 10538

ABA: 021000021 / Swift code CHASU33
Account #: 198065436765
Beneficiary: Educational Encounters International, Inc. (EEII)
180 East Prospect Ave #142, Mamaroneck, NY

3. LAND PACKAGE PRICE

Minimum of 30 paying participants **\$1,290** per person (in double occupancy)

If there are less than 30 paying participants the price per person will be higher

Supplement for single room **\$450** per person

Additional Fees (not included in package price above)

Standard tips & gratuities for guide, driver, hotels/restaurants **\$90** per person (please bring this with you in cash)

Keshet strives to offer fair pricing and therefore does not budget for contingencies resulting from weather or security issues. Itineraries may be altered as a result of these factors. Also, the prices listed reflect rates quoted by hotels and other vendors as of January 2009. In the event of devaluation of the US dollar exchange rates, hotels and other vendors may add surcharges; Keshet reserves the right to pass such increases on to trip participants.

4. ACCOMMODATION

| Hotel | Dates | Nights | Meal Arrangements |
|----------------------------|----------|---------------------|-------------------------------|
| Beit Yedidia Haifa | 16/07/09 | 3 nights | Full board |
| Achziv Beach | 19/07/09 | 1 night | Full board |
| Kare Deshe YH Tiberias | 20/07/09 | 2 nights | Half board |
| Lev Yerushalayim Jerusalem | 22/07/09 | 1 night 3 nights | Bed & Breakfast Half board |
| Kadesh Barnea Negev | 26/07/09 | 3 nights | Full board |
| Beit Ruth-Daniel Tel-Aviv | 29/07/09 | 1 night | Half board |

5. WHAT'S INCLUDED

Price includes:

Air conditioned bus for touring days
Licensed tour guide for touring days
Entrances to sites
Accommodation as mentioned above

Price DOES NOT include:

Other than mentioned in the included column
Tips to guide, driver and Hotel/Rest. Staff (see *additional fees*)
Medical & Travel insurance
Personal expenses
Some lunches (see above)
Flights.

6. CANCELLATION OF BOOKINGS

If you are forced to cancel your holidays, it is important to note that the cancellation of booking is accepted in writing and is not effective until received by EEII. In the event of a cancellation by either one or all named persons in the booking form, we will charge the following scale of cancellation charges.

| Period before departure in which notification is received | Cancellation as a percentage of holiday price to be charged |
|--|--|
| More than 46 days | Deposit |
| 28 – 45 days | 30% |
| 21 – 27 days | 40% |
| 7 – 20 days | 50% |
| 3 – 6 days | 75% |
| 2 days or less before departure | 100% |

7. TRAVEL INSURANCE

Keshet highly recommends that you purchase travel insurance prior to your departure.

8. DISCLAIMERS

Keshet: EEII, acts only as an agent for the tour participants in making arrangements for hotels, transportation, touring, restaurant, or any other services in connection with the itinerary. We will exercise reasonable care in making such arrangements. However, we do not assume any liability whatsoever for any injury, damage, loss, accident, delay or irregularity to person and property because of an act of default of any hotel, airline carrier, restaurant, company, or person rendering any of the services included in the tour. The right is reserved to cancel or change itineraries or to substitute comparable service without notice. The right is reserved to decline or accept or retain any tour passengers should such person's health or general department impede the operation of the tour to the detriment of the other tour participants. Rates are based on standard rooms unless otherwise indicated. No refunds will be given for unused package inclusions.

Itineraries may be altered as a result of security, logistics or weather concerns determined by either Keshet or the contracting group. Costs associated by such changes are the responsibility of the group. In the event of devaluation of the US dollar, hotels and other vendors may add surcharges; Keshet reserves the right to pass such increases on to trip participants.

9. ENQUIRIES

For any general question about this trip please contact **Andy Ernst:**

Operation Exodus Young Adult Program Coordinator

andy@theisrael-project.org

or write to

Andy Ernst

The Israel Project
Bremlenstrasse 7
8234 Stetten
Switzerland

Your trip coordinator in Israel is Moshe Gabay:

Keshet's European Programs Manager

Please feel free to contact him with any questions:

moshe@keshetisrael.co.il or Tel: +972 2 671 3518

The Israel Project is part of the Next Generation Program for **Ebenezer - Operation Exodus**. We are partnering with Keshet: *The Center for Educational Tourism in Israel* who have worked closely with us in planning and implementing The Israel Project for 2009. For more information about Keshet see www.keshetisrael.co.il



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