

RESERVATION FORM

*Succot - Feast of Tabernacles in Jerusalem
Sep 23 -30, 2010*

NAME _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP: _____

Email address: _____

Home Tel No.:() _____ Work Tel No.:() _____

Requesting to stay at:

() The Crowne Plaza Hotel. () Tourist class hotel

Looking for a roommate? Y () N () (see price for single room supplement)

My roommates name is: _____

Date I want to check-in the hotel: _____ Date I want to check-out _____

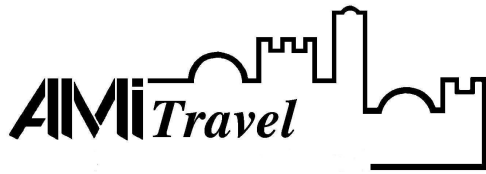
Date and time arrival TLV _____ *Airlines / flight No.* _____

Date and time departure TLV _____ *Airlines / flight No.* _____

To secure your participation in the program: Send a check for \$250 per person along with the reservation form to our office in Chicago, OR email / fax this registration form along with your credit card information. *Balance due August 23, 2010*

Chicago office: AMI Travel. Attn. Lebbie Chung. 5809 N. Cicero Ave. Floor 1, Chicago, IL 60646

Fax in Israel +972-3-641-6621 email address: amos@amitravel.com



CREDIT CARD AUTHORIZATION FORM

NAME (Print exactly as it appears on the credit card)

First Name Last Name Phone Number

ADDRESS (as on credit card statement)

Number Street Apt. # City State ZIP

EMAIL ADDRESS: _____

CHECK TYPE OF CARD: [] VISA [] MASTERCARD [] AMEX [] DISCOVER

Credit Card Number:

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AMOUNT OF CHARGE: \$ _____ **EXP. DATE:** Month ____ Year ____

SERVICE CHARGE: (4.00%) \$ _____

TOTAL AMOUNT: \$ _____ **CVV:** _____

The **CVV** is a three-digit value for Visa/MasterCard, four-digit for Amex. Visa/MasterCard: values are printed on the signature panel on the back of the card, immediately following the card account number. Amex card: appears on front right side of the card, above the card number.

This charge is to applied to the following travelers:

I hereby authorize AMI Travel, Inc. and/or its suppliers to charge the above credit card.

Card Holder Signature: _____ Date: _____

f _____ *f*

RECEIPT FOR CREDIT CARD CHARGE – AMI Travel, Chicago

My card: [] VISA [] MASTERCARD [] AMEX [] DISCOVER

Was charged for touring services taken on these dates: _____

For the amount of \$ _____.

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