

REGISTRATION FORM
Jewish End-Time Ministries, Inc.
BIBLE TOUR TO THE HOLY LAND
Hosted by Dr. Henry Benach & Dr. Steve Cook
March 28-April 6, 2011



LAST NAME (as it appears on your passport): _____

FIRST NAME (as it appears on your passport): _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE _____

DAY TIME TEL. # () _____ HOME TEL. # () _____

E-MAIL ADDRESS: _____

BIRTHDATE: DAY _____ MONTH _____ YEAR _____

SINGLE SUPPLEMENT AT \$516 USD: YES ___ NO ___

I WISH TO ROOM WITH: _____

PASSPORT NUMBER: _____ Expiry Date: _____

PLEASE MAIL COPY OF PHOTO PAGE OF PASSPORTS (OPEN TO NAME AND VALIDITY)

EMERGENCY CONTACT: _____ TEL: () _____

ENCLOSED CHECK PAYMENT OF DEPOSIT \$300.00 PER PERSON

FOR _____ PERSONS @ \$300 EACH SUB TOTAL \$ _____

FULL, NON REFUNDABLE, PAYMENT DUE BY JANUARY 28, 2011

All checks should be made out to *JEWISH END-TIME MINISTRIES.*

Completed application and deposit should be mailed to JEM MISSIONS at the below address:

JEM Holy Land Bible Tour
Jewish End-Time Ministries
Attn: Dr. Henry Benach
P.O. Box 300
Graysville, GA 30726