

Israel 2026 **Individual** Registration Form

Hosted by Pastor John and Chris Leach October 7th-17th, 2026

Inclusive **ground fees** tour price \$5800 **per person** which includes \$1,000 deposit. *Airfare excluded*

Checks must be made payable to **REVEREND JOHN LEACH**

If you wish to register and pay online, go to www.jfc.org/israel

I agree with the payment schedule as follows:

- Deposit of \$1,000.00 per person upon registration. **(\$1,035.00 by credit card)**
- First payment of \$1600.00 per person will be due on April 15th, 2026. **(\$1656.00 by credit card)**
- Second payment of \$1600.00 per person due on May 13th, 2026. **(\$1656.00 by credit card)**
- Final payment of \$1600.00 per person will be due on June 17th, 2026. **(\$1656.00 by credit card)**

(There is an additional 3.5% processing fee on each payment. If paid in full, total processing fees will be \$203.00.)

Single room accommodations offered at an additional **cost of \$1940.00 (\$2007.90 by credit card).**

(This is required if you do not wish to share accommodations with another person.)

You MUST reserve airfare by Wednesday, August 15th, 2026.

I understand that my **\$1,000.00 non-refundable** deposit will be used to guarantee hotel space and ground tour fees.

Each traveler needs to fill out a separate application.

CANCELLATION POLICY

Full payment due by Wednesday, June 17th, 2026.

In case of cancellation: Wednesday, June 17th, 2026, or prior- \$1,000.00 per person cancellation fee.

Thursday, June 18th, 2026, or after, no refund (unless trip is cancelled).

Cancellations must be made in writing to Reverend John Leach.

REVEREND JOHN LEACH LIABILITY:

Reverend John Leach and his agents and/or his representatives abroad (hereinafter, collectively "Tour Providers"), act only as agents for those passengers traveling on the tour described herein (hereinafter, collectively "Tour Members") in making arrangements for hotels, transportation, touring, restaurants, and/or any other services in connection with the itinerary stated herein. Tour Providers will exercise reasonable care in making such arrangements. However, Tour Providers do not assume any liability whatsoever for any injury, damage, loss, accident, delay, or irregularity to any person (including, but not limited to, Tour Members) or property because of any act or failure to act or default of any hotel, carrier, restaurant, company, entity or person rendering any services. Tour Providers do not assume any liability whatsoever for any injury, damage, loss, accident, delay or irregularity sustained by a Tour Member due to the actions or inactions of any person or entity who is not the Tour Provider whether during tour activities or not. Tour Providers reserve the right to reasonably vary itineraries and substitute components of tour programs at any time between the Tour Member's signing of the contract for tour services and the actual operation of the tour program without any liability of Tour Providers for any such variations and/or substitutions. Tour Providers reserve the right to accept or deny acceptance of any person as a member of any tour. Any and all disputes related to this contract shall be litigated within the State of Colorado, according to the laws of Colorado, irrespective of Colorado's choice of laws. The parties agree to waive their right to trial by jury. By registering for this tour and/or paying a deposit, you indicate that you have read and accepted the terms and conditions applicable to this tour.

PLEASE PRINT LEGIBLY

1. **FULL (First, Middle, Last) LEGAL NAME**
(As appears on your passport)

2. **First Name** as you would like used on your tour name tag.

3. **Complete Mailing Address:**

Street Address

City

State

Zip

4. **Emergency Contact Information (Not Going On Trip):**

Name

Home Phone

Cell Phone

Work Phone

5. **Email Address:** _____

Please note that the majority of correspondence will be done by email.

6. **Telephone Numbers:** (please include area code)

Home: _____ Cell: _____

7. **I Would Like To Share Accommodations With:** _____

8. **PASSPORT INFORMATION:**

Full Name (first, middle, last) as it appears on Passport

First _____ Middle _____ Last _____

Date of Birth: _____ Gender: Male _____ Female _____

Passport Number: _____

Expiration Date on Passport: _____

Important - If your passport expires before April 1st, 2027, you must renew your passport.

Must bring a colored copy of your passport to Jubilee Fellowship Church no later than June 17th, 2026

Return this form and deposit check to Reverend John Leach

9359 E. Nichols Avenue, Centennial, CO 80112

Phone: 303-738-9416

Amie Piller- apiller@jfc.org - for more info or questions

www.jfc.org/israel