



# JNF CANADA – Congregation Beth Israel/Har-El

## VOLUNTEER MISSION TO ISRAEL

### April 1-8, 2024 | Registration Form

To be completed by each individual (PLEASE PRINT)

Family Name \_\_\_\_\_ First Name \_\_\_\_\_

Name as appears on Passport (PLEASE PRINT): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
dd/mm/yyyy

Passport Country: \_\_\_\_\_ Number: \_\_\_\_\_ Expiry: \_\_\_\_\_  
dd/mm/yyyy

*Passport must be valid 6 months past return to Canada (i.e September 8, 2024). A copy of photo page is required.*

Email: \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Price: \$2700 USD Land only, Based double occupancy, Price does not include airfare.

Please "X" the appropriate Boxes:

- Land only Package – (double occupancy) sharing with: \_\_\_\_\_
- Single Supplement - additional \$1,000 USD

I understand that it is my responsibility to arrange my own flights to and from Tel Aviv. If I arrive early or extend in Israel, transfers to/from the airport are my responsibility.

I herewith enclose my deposit \$1,200.00 USD payable to the Jewish National Fund of Canada. Payment can be made by cheque, money order or credit card. When paying by credit card, I understand that a 2.6% administration charge will apply. I understand that I am responsible to take out a full comprehensive insurance package and complete an insurance waiver which JNF will provide. **I will submit the balance of payment of the mission by March 1, 2024.**

Payment - \$1,200 USD deposit required with registration

Cheque on USD account or bank draft (Payable to the Jewish National Fund of Canada)  Visa  Mastercard

Credit Card #: \_\_\_\_\_ Expiry: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Registration form and deposit should be sent to the Vancouver Office, 950 W.41<sup>st</sup> #301, Vancouver, BC, V5Z 2N7.

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