

Click to Download Registration Form

Save The Date!  
Initial Deposit Due  
December 24<sup>TH</sup> 2023

\$300<sup>00</sup>

# THE EXODUS TOUR

DEPARTURE DATE: MONDAY, JUNE 24<sup>TH</sup>, 2024

Mail your Registration Form to:  
THE ABIDING WORD MINISTRIES INT'L  
170-20 140<sup>th</sup> Avenue, Jamaica, Queens, NY 11434

## Registration Form

Legal Name: \_\_\_\_\_  
First, middle and last as it appears on your passport

Title: Preferred Name: \_\_\_\_\_  
Mr. / Mrs. / Ms. / Rev. / Dr. If different than above

Street Address: \_\_\_\_\_  
\_\_\_\_\_

P.O. Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: Area Code \_\_\_\_\_

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

Sex: M \_\_\_ F \_\_\_ Age: \_\_\_\_\_ Nationality: \_\_\_\_\_

Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
month day year

Emergency Contact: \_\_\_\_\_

Phone: w/Area Code \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Referred by: \_\_\_\_\_

Your Roommate Name: \_\_\_\_\_

Please try to match me with a roommate

I want s single room

(availability limited and at an additional cost)

Departure City:

New York City

Other: \_\_\_\_\_

Payment:

Via check - Payable to **The Abiding Word Ministries**

\$ \_\_\_\_\_  
(Amount enclosed with Registration)

FULL DEPOSIT OF \$300/PERSON REQUIRED  
COPY of PASSENGER'S PASSPORT (photo page)  
REQUIRED 90 DAYS PRIOR to TRAVEL

Signature: \_\_\_\_\_  
(Minors require parental or guardian signature)

\* Enrollment in and payment of deposit constitutes your acceptance of the "TERMS." I understand that I am responsible for and agree to pay any post-booking increases in fuel surcharges, taxes, and fees as provided in the "TERMS." I understand that final payment in the form of a check is due no later than 90 days prior to departure date.

Please contact The Abiding Word Ministries Int'l  
Email: [tawm@abidingwordministries.net](mailto:tawm@abidingwordministries.net) Phone: 718-323-2918  
Reference TAWM HolylandTours

## Be Prepared!