

## *Go to Israel with Ron 2025*

**INCLUDED IN TOUR PRICE:** Pre-Trip Meetings; Airfare from Chicago; Ground Transportation in Israel; up to 13 Nights Hotel Accommodations based on double occupancy; Admission to Sites; Tour Book.

**NOT INCLUDED IN TOUR PRICE:**

1. Trip Cancellation Insurance
2. Optional Health Insurance offered by the tour.
3. Fuel surcharges, which may be imposed by airlines and suppliers after ticketing
4. Miscellaneous fees such as, passports, excess baggage, and items personal nature
5. Travel to and from your home to departure airport
6. Any Visa fees if necessary (There are no visa fees at present)
7. Lunch and Supper each day (Cost of approximately \$650 per person)
8. Itinerary changes that necessitate extra overnight expenses.
9. We will do our best to match you with a roommate for the trip if you so desire; those desiring a single room or those we are unable to match with a roommate will be responsible for a **Single Supplement of \$1200**
10. Cost of any Taxi's required by traveler if unable to walk to various venues.

**AIRLINE TICKETS/FLIGHT TIMES:** Air transportation jet economy class from Chicago. Flight times subject to change by airlines; the tour is not responsible for such changes/delays and cannot reimburse expenses resulting from such delays.

**HEALTH RELATED ISSUES ON THE TRIP:** In the event of any health care need (accident or sickness) which may arise during the trip, it is the responsibility of the individual/couple to arrange for care and for travel to and from a medical facility in Israel at their expense.

**PAYMENT:** Trip cost per person, \$6,450 plus items listed above

**A \$500 per person deposit and a signed copy of this contract is required to secure reservations.**

An additional \$3000 per person is due September 15, 2024 with the final balance due November 15, 2024; thereafter a late fee of \$200 will be assessed.

**CANCELLATION FEES:** The \$500 reservation fee is non-refundable along with any fees/charges that are non-refundable to the tour organizer from our vendors.

**Sign and return this entire form along with your check for \$500 per person to:**

Ron Reynolds      PO Box 7373      Grand Rapids, MI 49510      (616) 334-7085

**(Checks payable to Ron Reynolds)**

I understand the **Go to Israel with Ron** contract and agree to abide by its terms.  
(If this contract is for Husband and Wife, both must sign below)

Signed \_\_\_\_\_

Date \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

**Please Indicate Trip Dates** \_\_\_\_\_