



ISRAEL TRAVEL ADVISORY SERVICE, LLC.

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ADULT ONLY TOURS

May 14 - 24, 2009

October 22 - November 01, 2009

December 24, 2009 – January 03, 2010

RESERVATION FORM (please print)

List full name separately of each participant

Name: _____

Name: _____

Address: _____

Home Phone # _____ Bus # _____

Fax # _____ E-Mail _____

Tour Date: *May 14-24, 2009* *Oct 22-Nov 01, 2009* *Dec 24, 2009-Jan 03, 2010*

Please check one: *Air & Land (from NYC)* *Land Only*

Note: Minimum deposit of \$250.00 per person is required with completed reservation form.
Please make check payable to: I.T.A.S.

Amount of deposit enclosed \$ _____ (\$250 per person X no. of passengers).

I would like to share with _____

I would like to have a Single Room (for an additional \$735)

A ***legible*** photocopy of each participant's passport (showing photograph and all pertinent dates) is required 60 days prior to departure. Israel requires that all travelers to Israel have a passport that is **valid for a minimum of six months after the date you arrive in Israel**. If your passport expires prior to this requirement, please apply for a new passport as soon as possible.