

Your responses may be handwritten or typed. Completed forms and payment may be returned via email or mail. All Checks should be made out to The C.S. Lewis Institute and mailed.

Email: events@cslewisinstitute.org

Mail: C.S. Lewis Institute • 8001 Braddock Rd, Suite 301 • Springfield, VA 22151 • Attn: 2020 Israel



2020 Israel
Registration Form
October 11-23, 2020

Last Name: _____ First Name: _____

Roommate Request: _____

A \$1,000 deposit is required by November 12, 2019 to register.

Double Occupancy (2 persons/room): \$3,600/Person

Deposit: \$1,000 – Due Nov 12, 2019

2nd Payment: \$2,300 – Due May 15, 2020

3rd Payment: Bring \$300 in good condition \$50 or \$100 U.S. dollar bills to be collected by CSLI in Israel upon arrival on October 11, 2020 for tips, taxes, & misc. fees.

Single Occupancy (1 person/room): \$4,550/Person

Deposit: \$1,000 – Due Nov 12, 2019

2nd Payment: \$3,250 – Due May 15, 2020

3rd Payment: Bring \$300 in good condition \$50 or \$100 U.S. dollar bills to be collected by CSLI in Israel upon arrival on October 11, 2020 for tips, taxes, & misc. fees.

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Preferred Phone: _____

Male Female Date of Birth: _____ Citizenship: U.S. Other: _____

Passport #: _____ Expiration Date: _____

Passport Place of Issue: _____ Passport Issue date: _____

Valid Passport Required

I understand that a VALID PASSPORT IS REQUIRED for this trip and that it must be valid for at least 6 months beyond initial entry into Israel.

Minimum Number of Participants

I understand that unless a minimum of 10 registrations have been received by DATE, the trip will be cancelled and a full refund of the program fee will be issued to me.

Health Advisory & Special Accommodations

I understand that the C.S. Lewis Institute may be unable to provide special accommodations for people with disabilities due to the nature of accommodations, roads, trails, busses and handicap access in foreign countries.

I understand participants in the Israel Study Program should be able to walk and stand for at least an hour or so and climb a few flights of stairs in order to participate. Program includes hiking on trails, walking on stone pavement and stairs.

Risks of Participation

I understand that the Program involves risks in traveling to, within, and/or returning from foreign countries, including, but not limited to, political, legal, social, and economic conditions; different standards of design, safety, and maintenance of buildings, public places, and conveyances; and local medical and weather conditions. I am of legal age and have made my own investigation, have obtained materials from a variety of sources, and am willing to accept these risks.

Activities

I understand that I am participating in this program with the understanding that neither the CS Lewis Institute (hereinafter, CSLI) nor Bible World Seminars (hereinafter, BWS) are responsible for any injury or loss I may suffer anytime during this program.

Health and Safety

I have consulted with a medical doctor with regard to my personal medical needs. There are no health-related reasons or problems, which preclude or restrict my participation in this Program.

I am aware of all personal medical needs. I have arranged, through insurance or otherwise, to meet all needs for payment of medical costs while I participate in the Program. I recognize that neither CSLI nor BWS are obligated to attend to any of my medical needs, and I assume all risk and responsibility thereof. If I require medical treatment in a foreign country or the United States, neither CSLI nor BWS are responsible for the costs or quality of such treatment.

CSLI and / or BWS representatives may, but are not obligated to, take any actions warranted under the circumstances regarding my health and safety. I agree to pay all related expenses and release CSLI and its officers, staff, and employees, BWS and its staff, employees, and James C. Martin from any liability for any actions.

Standards for Conduct

I understand that each country has its own standards of conduct, including dress codes, manners, morals, politics, drug use, and other types of behaviors. I recognize that conduct violating these standards may result in criminal and/or civil action against me, the people I am traveling with, and jeopardize my own health and safety as well as those I am traveling with. I will become informed of and abide by all such standards for each country to or through which I will travel during the Program.

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I agree to abide by all laws of all countries traveled in or through during the course of this program and understand that failure to do so may result in immediate termination in the program as well as possible legal consequences. I understand that this also applies to photographic (still and video) and audio recording laws where taking, recording, using, posting or publishing audio recordings, photographs, and/or video of individuals, museum artifacts, military and security personnel, and restricted military areas (hereinafter, Subject) are protected by the legal rights and ethics of the Subject and may require the Subject's written consent. I understand failure to obtain such consent may result in criminal and/or civil action against me. Moreover, I understand James C. Martin allows photographs and audio recordings (no video recordings) of lectures for private and personal use only. Therefore, I agree not to post, publish or use photographs and/or audio recordings of James C. Martin outside of private and personal use.

I understand it is my responsibility to attend to any legal problems I encounter with, including but not limited to any: government (domestic, foreign, civilian, and/or military), individuals, companies, institutions, and their personnel. I agree and understand CSLI, BWS, and James C. Martin are not responsible for providing any assistance under such circumstances.

Program Changes

I understand that CSLI and BWS have the right to make changes, cancellations, or substitutions, in case of emergency, changed conditions, or in the interest of the Program. I also understand that fees and program charges are based on current airfares, lodging rates, and travel costs, all of which are subject to change. If I leave or am expelled from the Program for any reason, there will be no refund of fees already paid. I accept all responsibility for loss or additional expenses due to delays or other changes in the means of transportation other services; sickness; weather; strikes; or other unforeseen causes. If I become detached from the Program group; fail to meet a departure bus, airplane, or train; or become sick or injured, I will at my own expense seek out, contact, and rejoin the Program group at its next available destination.

Cancellation and Refund Policy

CSLI and BWS are not involved in the purchase of airline tickets. I understand that airline tickets are usually not refundable once purchased and that any airline refund request is the sole my responsibility and determined by the airline policy.

CSLI and BWS cannot control cancellations, changes, and cost due to medical problems, adverse political activity, civil unrest, strikes, severe weather or adjustments in the announced airline fees and / or schedules. No refund is possible once any payments are made for airline and overseas services (except through approved travel insurance coverage or in accordance to airline policy) regardless of any unforeseen situations.

Assumption of Risk and Release of Claims

Knowing the risks described above, and in consideration of being permitted to participate in the Program, I agree, on behalf of my family, heirs, and personal representative(s), to assume all the risks and responsibilities related to my participation in the Program. I release and indemnify CSLI, BWS, James C. Martin, and their officers, employees, and agents from and against any present or future claim, loss, or liability for injury to person or property that I may suffer or for which I may be liable to any other person, during my participation in the Program (including periods in transit to or from any country where the Program is being conducted).

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Waiver of Responsibility

I fully understand and agree:

- 1) To assume all risks and accept personal responsibility as a participant in this program;
- 2) This Program may be canceled or price may change due to political or other factors beyond the control of CSLI and BWS and thereby hold CSLI, CSLI staff and representatives, BWS, James C. Martin, BWS staff and representatives, and all group sponsors blameless in the event of personal injury, cancellations, changes in travel program, schedule and/or adjustments in announced fees;
- 3) To release CSLI, CSLI staff and representatives, BWS, James C. Martin, BWS Staff and all group sponsors from claims of any nature incurred while on this program;
- 4) That in the event of war, civil unrest, strike, medical emergencies, or cancellation for any reason, any refund will be solely determined by the participant's travel insurance policy and / or medical insurance policy.

I have carefully read this document. No representations, statements, or inducements, oral or written, apart from the statements contained herein, have been made. This agreement shall become effective only upon receipt of my application and deposit to BWS and shall be governed by the laws of the state of TEXAS.

By signing or typing my name below, I acknowledge that I have read and fully understand the information contained in this registration form and verify the information I have provided as truthful and correct.

Signature of Applicant: _____

Date: _____

Emergency Contact Information

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone #1: _____ Phone #2: _____