Registration Form to be completed and emailed to Amirah Hall with Copy of Passport Photo ID Page.

(Please retain a copy of this form for your records)

The Heart of Egypt: Divine Union Tour II Oct 27 –Nov 8, 2022
(Post Tour Options Available)

Legal Name on Passport: _____ _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

HOME: _____ CELL: _____ FAX: _____

E-mail:_____

PASSPORT # and Country of Issue_____

Expiration Date: _____

Birthdate:_____(Day/Month/Year & City)

Medical Condition and/or Special Dietary Needs *(Please be as specific as possible; such as allergies, special diet; airport wheelchair, etc. Please be advised that there is no elevator onboard cruise ship, and it is necessary to use stairs between decks. Please be advised that if you require personal assistance, please travel with a friend or companion. Wheelchairs are available at airports and some sites in Egypt, but not all. A minimum amount of walking is necessary at each site. Climbing inside the Great Pyramid, as well as any inside tomb visit, is up to you and not mandatory.*

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( ) DBL Occupancy $ 5995 P/P **( ) Single Room $7495.**

- **All rooms at Mena House are Garden View; Room Upgrades Available at additional cost upon hotel availability at check-in. Guest will pay hotel directly. Rooms at Luxor Hilton all have Nile view.**

Name of roommate, if known: _____

Every effort will be made to provide a roommate; otherwise, single supplement will apply.

TRIP OPTIONS: Please check the following options.

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Extra Nights Airport Meridien Pre-Tour: Single $130 per night. # of nights requested & dates. ( )
DBL $70 per person. # of extra nights requested & dates. ( )

Extra Nights Mena House Post-Tour: Single $450 (Garden View Room Only) #of nights requested & dates. ( )
DBL $250 per person per night (Garden View Only). # of Nights requested & dates. ( )

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Abu Simbel Option: (From Aswan Cruise) $550 per person. Includes r/t flight from Aswan/ Abu Simbel/Aswan/Cairo. ½ day tour with private guide. Minimum of 4 guests required. ( )

7-night Luxor/Hurgada Option (Post tour). Contact Mary or Amirah directly for separate price & itinerary. Please make flight arrangements accordingly. Minimum of 4 guests required ( )

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FLIGHT INFORMATION:

ARRIVAL DATE INTO CAIRO: Airline, flight number, and time of arrival INTO Cairo:

_____
(NOTE: This is your arrival time into Cairo, NOT your departure flight time from US. Once you pass through customs, our trip representative will meet you and help with your luggage and transfer to hotel. EGYPTIAN VISA INCLUDED, but you must send valid passport details when registering.)

DEPARTURE DATE FROM CAIRO: Airline, flight number & time of departure from Cairo

_____

*Please provide all flight details as listed. You do not need confirmed flights to register. However, You MUST have valid passport good for 6 months after your travel departure dates. **PLEASE CHECK** that your passport is valid for minimum of 6 months after your travel dates are complete. International flight information will be provided upon request. ALL incoming travelers to Egypt must show hard copy (printed) validation of negative covid-19 testing 96 hours prior to arrival in Egypt. Digital validation (smart phone/tablet) is not accepted in Egypt. Please contact Amirah/Mary for further information.
*** In rare cases, tour itinerary may be subject to slight changes depending on conditions in Egypt.*

REGISTRATION & PAYMENT DETAILS:

THIS TRIP INCLUDES: Egyptian visa issued upon arrival for US & Canadian passport

holders only. All 5-star accommodations; deluxe Nile cruise; private time inside Great Pyramid & Paws of the Sphinx; all meals as specified; bottled water daily; private Egyptologist & guide; ALL airport transfers & concierge baggage handling; domestic Egypt airfare flights; private a/c transport in Egypt, and all entry tickets to sites as listed in itinerary.

NOT INCLUDED: International airfares, extra hotel nights, tipping for Egyptologist /guides and bus drivers. Mary will provide tipping sheet upon registration.

TRIP COST: $5,995 USD per person Double Occupancy
$7,495USD per person Single Occupancy

Please send deposit fee of $800 (Double Occupancy) and $1000 (Single Room) with your signed Registration Form and photocopy of first 2 pages of your passport. (*Availability of Single rooms is limited)**

Please send deposit ASAP with Registration Form to address below.

50% of trip cost (including deposit must be paid by JULY 15, 2022
Full Trip Balance must be paid in full by Sept 1, 2022.

REGISTRATION & PAYMENT METHODS:

1) **Personal Checks/Bank Checks or MO made out to:**
Amirah Hall Consulting/Amirah Hall
Amirah Hall, 1400 Westinghouse Road, #4713, Georgetown, TX 78626

2) **Bank Wire/Zelle Transfers contact Mary 858-405-0042 or amirahhall@gmail.com**

3) **Credit cards accepted via PayPal with 3% fee added**

Cancellations: Due to the special pricing of this trip, there are no refunds once monies are wired to Cairo**. Most international tours must be fully paid for 90 days in advance of arrival. We are receiving special consideration**. Purchase of TRAVEL INSURANCE is now required for international travel. Please see www.insuremytrip.com to compare prices.

Trip Waiver: *I agree to release Mary Lomando/ PachaTerra Travel and Temo Travel (Land Operator in Egypt) from all responsibility and liability for unforeseen circumstances and/or changes in the itinerary due to weather or political circumstances in Egypt, and for any PERSONAL, physical or mental illness occurring during tour dates. I understand that I have been advised to purchase trip insurance, as there are no refunds from PachaTerra Travel once my trip payments have been made. I understand that I must provide written proof of negative covid-19 test 96 hours prior to arrival in Cairo. I understand that the itinerary MAY be adjusted due to conditions in Egypt. I understand that if I am assigned a roommate, any room changes or extra charges once trip has begun are my responsibility. I fully understand and agree to ALL REGISTRATION and PAYMENT POLICIES (including travel insurance recommendation and COVID-19 TESTING) and understand and agree to all the above information.*

Signed _____ Date: ----------