

Registration Form

Fill in one sign up form per traveler, sign and mail to Nor-Am Tours LLC, W4809 Overlook Dr., Elkhorn, WI, 53121. Enclose a check with the deposit of \$500 per traveler. Make checks payable to Nor-Am Tours.

Tour:	Pilgrim Tour July 19. – 30, 2013				
FULL NAME (Spell the name as it is in your passport or driver's license):					
Last:			_		
First:					
Middle:					
Address:					
City, State, ZIP:					
Telephone:					
Email address:					
Passport number:		sure you get one as	If you don't have a passport at the time of sign up, make sure you get one as soon as possible. Provide the passport number to Nor-Am Tours as soon as you have it.		
Passport expiry dat	te:				
Date, Signature:					
REQUIRED INFORM	MATION:				
Gender:		Circle One:	MALE	FEMALE	
Date of Birth:		Month	Day	Year	
Emergency Contact	t:				
Emergency Phone Number:					
PLEASE LIST ANY MEDICAL CONDITIONS (Use another page if necessary):					
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