



# Holy Land Pilgrimage

With  
**Fr. Peter Lawsom, OFM and  
Christopher Cross, KHS**

**Exciting 10-Day Pilgrimage  
to the Holy Land  
January 9 – 21, 2022  
\$3,950 per person or  
\$2,900 land only package**

*We will visit Jerusalem, Bethlehem, Nazareth, Sea of Galilee, Jordan River, Mt. Tabor, Way of the Cross, Garden of Gethsemane, and all the mystery sites of the Holy Rosary and much more.*



### Trip Includes:

- Round trip air Newark, NJ or JFK, NY to Tel Aviv, Israel
- 5 nights in Jerusalem
- 3 nights Sea of Galilee
- American style **breakfast, plus lunch and dinner daily**
- Hotel Room (2 person per room)
- All entrance fees
- English speaking Catholic guide
- Daily Mass at all the Holy Sites

**Not included are:** all tips, gratuities, (lunch only on the last two free days) any new additional fuel surcharges that may be added from time of registration to departure date

Open days' lunches are on your own. Please make a deposit of \$1,500 to secure air seats. **Balance is due 90 days prior to departure.**

For more information

Call: 1-704-274-2031

or email: [christopherxcross@gmail.com](mailto:christopherxcross@gmail.com)  
or visit [www.catholicolyland.com](http://www.catholicolyland.com)  
and print a registration form.

**SEE THE ITINERARY AT:  
[www.catholicolyland.com](http://www.catholicolyland.com)**

See on the web sites travel tips from Chris  
Total price for the trip is per person based on double occupancy. Private room supplement is \$900. **Deposit of \$1,500 due to secure air seats and balance is due 90 days prior to departure.**



**Yes!** I wish to travel with Christopher Cross, KHS on a 10 day Pilgrimage to the Holy Land January 9-21, 2022

Enclosed please find my deposit check of per person.

There will be a \$300.00 cancellation fee if I cancel the trip less than 30 days prior to departure. Travel Insurance available at the top of my web site under resource tab. Please enclose a copy of your passport with registration page.

### My check is made payable to:

Christopher Cross, KHS,  
15803 Oxford Glenn Drive  
Huntersville, NC 28078  
1-704-274-2031

Name & DOB

Address

Address

Phone No.

I would like a private room  
(\$900 private room supplement)

I would like to share a room with:

Name

Non-Smoking

Smoking

What name is on your passport? DOB

What name would you like on your name tag? (name you want to be called)

I am enclosing

I am enclosing \$ \_\_\_\_\_

as full payment for my tour.

*Final payment Is due 90 days prior to leaving.*

**Sorry! No payments by credit card!**