10 Day - Holy Land Pilgrimage

Christopher Cross, KHS two Catholic priests

xciting 10-Day Pilgrimage to the Holy Land September 15 -26,2024 \$4,980.00 per person or Land only \$3790.

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 much more.

Trip Includes:

- Round trip air Newark, NJ to Tel Aviv, Israel on El Al Airlines
- 6 nights in Jerusalem
- 3 nights Sea of Galilee
- American style breakfast, plus lunch and dinner daily
- Deluxe Motor coach
- · 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 on the last two free days) any new additional fuel surcharges that may be added from time of registration until date of departure.

Open days lunch is on our own. Please make a deposit of \$1,700 per person to secure air seats and **balance is due 90 days prior to departure**. I need a copy of your passport with the application.

For more information call **704-274-2031**

or email:

christopherxcross@gmail.com
or visit www.catholicholyland.com
to print a registration form and view my
itinerary at the top of my web site. This
pilgrimage is a very traditional Catholic
pilgrimage with daily Mass.

the price for the trip is \$4,980.00 per person based bubble occupancy. Private room supplement is \$1,100. Deposit of \$1,700 due to secure air seats and balance is due 90 days prior to departure.

Yes! I wish to travel with Christopher Cross on a Pilgrimage to the Holy Land.

□ September 15 - 26, 2024

Enclosed please find my deposit check of \$1700.00 per person.

Please beware that there will be a \$700.00 cancellation fee if you cancel the trip less than 70 days prior to departure. Travel insurance available at the top of the web site and highly recommended. This will be my 92nd trip to the Holy Land.

My check is made payable to: Christopher Cross, KHS, 15803 Oxford Glenn Drive Huntersville, NC 28078 704-274-2031

Please print clearly.
Name & Date of Birth
E-mail address
– Full Address or write on the back of this page.
☐ I would like a private room (\$1,100 supplement)
☐ I would like to share a room with:
Name Non-Smoking Smoking What name is on your passport? Passport number?
What name would you like on your name tag?
☐ I am enclosing a deposit of \$1700.0 ☐ I am enclosing \$

Sorry! No payments by credit card!



