

**The Holy Land – April 21-30, 2010**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Please circle your rooming arrangement – Single Double Amount Enclosed \$ \_\_\_\_\_

Room Mate(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_  
Signature Date

**Please include deposit of \$500 per person with your registration**

Return To: GVG Tours, 413 Highland Park Ave., Clinton WI 53525