REGISTRATION FORM

5 Day Pilgrimage to México

Fr. Peter Wood ***April 5 – 9, 2027***

St. Michael the Archangel Catholic Church – Houston, TX

By submitting this form, I understand it is my responsibility to obtain any visas/re-entry permit necessary for this trip if I don't hold an American Passport.

Your Passports Should Be Valid 6 Months After Your Return Date!

PLEASE ATTACH A COPY OF YOUR PASSPORT TO THIS FORM.

PLEASE PRINT YOUR INFORMATION BELOW

Last Name on Passport: First Name on Passport:
Middle Name on Passport:
Address:
City/State/Zip: Phone Number (including zip):
Email address:
Passport number: Country of issue:
Date of issue: Expiration date:
Gender: M F
My date of birth is (month/day/year): Country of birth:
In case of emergency please contact (name & phone):
Please choose one of the following:
⬭ I want to room with (give name):
⬭ I need a roommate
⬭ I want a Single Room **(at additional $800.00)**

A NON-REFUNDABLE DEPOSIT OF $300.00 PER PERSON **– (SEE TERMS & CONDITIONS)**

Please Make Checks Payable To: **Inspirational Tours, Inc.**

Please Mail Checks, Registration Form, & Copies Of Passports To:

Inspirational Tours, Inc.
5433 Westheimer Rd., STE 600
Houston, TX 77056

By Signing Below, I have read and agreed to all the terms and conditions as set forth in this brochure. Signature X_____ Date _____

(No Registration Form Will Be Processed Without Signature And Date.)