

JCC of Central New Jersey
POLAND AND ISRAEL
“A Journey From Dark to Light”
April 22- May 2, 2017

Fax/e-mail or mail completed application to: Sababa Travel
PO Box 445
Fanwood, NJ 07023

FAX: (425) 671-2374
Phone: (908) 347-7785
Email: jccpolandisrael2017@gmail.com

1. Please reserve “A Journey From Dark to Light” for:

- 1 Traveler
 2 Travelers

2. **Personal Information** (include title - Mr./Mrs./Ms./Dr./Rabbi)

1st Traveler _____
Title Name as it appears on your passport (First, Middle & Last) Nickname
Country of Citizenship _____ Male Female Birth date ____/____/____
Passport # _____ Place of Issue _____ Exp. Date ____/____/____

NOTE: Passports must be valid for at least six months beyond the return date of the trip

2nd Traveler _____ Title
Name as it appears on your passport (First, Middle & Last) Nickname (for name tag)
Country of Citizenship _____ Male Female Birth date ____/____/____
Passport # _____ Place of Issue _____ Exp. Date ____/____/____

NOTE: Passports must be valid for at least six months beyond the return date of the trip

3. **Address/Telephone:** Street _____ Apt. # _____

City _____ State _____ Zip _____ Home Phone () _____ Work Phone () _____

Cell Phone () _____ E-mail * _____

Flights

4. **International Departure (FLIGHT ARRANGEMENTS FROM USA TO WARSAW AND TEL AVIV TO USA MADE ON YOUR OWN)**

- I will depart on the recommended flight on the evening of April 22, 2107, time TBD.
 I will depart on my own.
 I am not sure at this time. I understand I need to let the JCC know by October 22, 2016.
 Please contact me to help arrange my flights.

If departing on your own, when is your flight?

Airline & Flight # _____ Departure Time & Arrival _____

5. Return to the United States (ALL FLIGHT ARRANGEMENTS MADE ON YOUR OWN)

- I will depart on the recommended flight, 05/02/17 (TBD).
- I will depart on my own.
- I am not sure at this time. I understand I need to let the JCC know by October 22, 2016.

If departing on your own, when is your flight?

Airline & Flight # _____ Departure Time & Arrival _____

NOTE: The JCC recommends that all travelers review their own personal insurance coverage needs with their insurance advisors to determine if additional travel insurance is required providing for reimbursement for trip delay, missed connections, sickness and accident medical expenses, lost baggage, personal effects, baggage delay, etc.

Cost of Trip

Please check the appropriate box:

- \$3,999 based on double occupancy and a minimum of 40 travelers (includes airfare from Warsaw to Tel Aviv)
- \$4999 based on single occupancy and a minimum of 40 travelers (includes airfare from Warsaw to Tel Aviv)

***Price based on the exchange rate one Euro=\$1.2 US dollar. If the exchange rate changes the cost per person will be revised.

6. Extensions: If you will be departing before the recommended evening flight on April 22, 2017, or extending your stay after May 2, 2017, please check off the appropriate box below.

- No extension
- I am arriving in Warsaw early, on April 21st and the JCC will make my hotel arrangements (ADDITIONAL COST).
- I am extending my stay in Israel and plan to have Sababa Travel make my arrangements (ADDITIONAL COST).
- I am extending my stay in Israel and making my own travel arrangements (ADDITIONAL COST).
- I am not sure at this time. I understand I need to let the JCC know by October 22, 2016

Extra Nights in Warsaw

- No extra nights
- \$325 double room for extra 2 nights(April 21 & April 22) – includes hotel, breakfast and transfer from airport to hotel. LIMITED SPACE AVAILABLE
- \$290 single room for extra 2 nights(April 21 & April 22) – includes hotel, breakfast and transfer from airport to hotel. LIMITED SPACE AVAILABLE
- I am not sure at this time. I understand I need to let the JCC know by October 22, 2016

Inbal Hotel Room Upgrades

I would like to add the following room upgrade at the Inbal Hotel in Jerusalem for 4 nights.

- No upgrade
- \$100 per night: Executive room-New City view – includes access to Executive lounge(over 18)
- \$135 per night: Executive room Old City view – includes access to Executive lounge(over 18)
- \$135 per night: Deluxe room New/Old City view – includes access to Executive lounge(over 18)
- \$425 per night: Executive Suite Old City view – includes access to Executive lounge (over 18)
- I am not sure at this time. I understand I need to let the JCC know by October 22, 2016

Accommodations

Note: When possible the JCC will attempt to find roommates if requested. However, if we are unsuccessful, traveler will be subject to the single supplement charge.

- I will room with traveler on this application.
- Please assign me a roommate. If one is not found, I understand I must pay the single supplement.
- I am not sure at this time. I understand I need to let the JCC know by October 22, 2016.
- I will room with a traveler that is not on this application.

Name of Roommate _____

Bed Type

- Single
- Twin Beds
- Double
- King Bed

Dietary Requirements

1st Traveler Dietary Restrictions

- None
- Kosher(sealed meal to be provided)
- Vegetarian
- Other

If "Other, please explain: _____

2nd Traveler Dietary Restrictions

- None
- Kosher(sealed meal to be provided)
- Vegetarian
- Other

If "Other, please explain: _____

7. Important Medical Information

(Allergies/Prescription, Medication/Illness/Presently under Physician's Care, etc.)

1st Traveler _____

2nd Traveler _____

Check if not applicable

- Traveler 1: No medical information
- Traveler 2: No medical information

8. Emergency Contact

1st Emergency Contact:

Emergency Contact Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

2nd Emergency Contact:

Emergency Contact Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

The JCC reserves the right to limit participation based upon eligibility requirements and space available.

Going for a Special Occasion?

Will you celebrate a Special Occasion on "A Journey From Darkness to Light"? Please specify with occasion and date.

Deposit

Enclosed is payment of:

- \$500 deposit per person (required with the application) - **\$50 PER PERSON IS NON-REFUNDABLE**

All checks should be made payable to: The JCC of Central New Jersey and mailed to:

Sababa Travel
PO Box 445
Fanwood, NJ 07023

Credit card info: VISA MasterCard American Express

Name on Card: _____

Card number: _____ CVV2#* _____ Exp. date ____/____/____

Please consider adding a fully deductible contribution of 3% to your total for credit card processing

*CVV2 code is the last 3 digits located on the back of your card in the signature box for Visa & MC; and 4 digits located in the front of the card for AmEx.

Generally, according to the Internal Revenue Code, your gift is deductible only to the extent that it, plus your payments for this trip, exceed the benefit received. In addition, any payments for extra air/or land cost are not tax deductible.

11. **Signature:** Must be signed by the person completing the application -**IMPORTANT!**

Name: _____ **Signature:** _____

Date: _____

PLEASE READ AND SIGN THE RELEASE FORMS ON THE NEXT FEW PAGES.

Release of Liability for Death, Personal Injury, and Property Damage
Missions to Israel and Worldwide Travel

I am aware of the risks of travel to Israel and travel worldwide, including risks associated with my safety and security. These risks include, but are not limited to, property damage and loss, death, or injury by accident, disease, or terrorist acts. I am voluntarily participating in the The JCC of Central New Jersey trip “A Journey From Darkness to Light” with a full understanding of these risks, and I assume and agree to accept any and all risks to my safety and security during the course of participating in the Mission.

I have read, or have had the opportunity to read the current World Health Organization update for the Poliovirus outbreak in Israel, the US State Department Polio Fact Sheet for Travelers and the Center for Disease Control and Prevention Polio Vaccine Guidance for Travelers and Note on Travel to Israel attached hereto. I understand that, in advance of the mission, I may periodically check the World Health Organization’s website, found at <http://www.who.int/countries/isr/en/>, to see if the update has been superseded by new information.

I have read, or have had the opportunity to read, the current United States Department of State’s Travel Warning for Israel, Gaza, and the West Bank, attached hereto (see next page). I understand that, in advance of the mission, I may periodically check the State Department’s website, found at <http://www.travel.state.gov>, to see if the Travel Warning has been superseded by a new Travel Warning.

I acknowledge and affirm that, notwithstanding any security arrangements that may be made by the JCC of CNJ, the JCC does not guarantee and is not responsible for my personal safety or the safety of my property while participating in “A Journey From Darkness to Light” or any JCC trip-related activities, including, but not limited to, airline travel, ground transportation, meals, lodging, and recreational activities.

In light of the above and in consideration of being permitted to participate in the “A Journey From Darkness to Light”, I do, for myself, my spouse, heirs, executors, administrators and assigns, release and forever discharge the JCC, its respective subsidiaries, affiliates, predecessors, successors and assigns, and all of its respective past, present, and future officers, directors, shareholders, employees, agents, and contractors, and their respective heirs, executors, administrators and assigns (collectively, the “Releasees”), of and from any and every claim arising from or by reason of any bodily injury, personal injuries known or unknown (including emotional trauma), death, or property damage resulting or alleged to result from any accident, incident, or other episode that may occur, whether based upon the negligence of, or breach of contract by, any Releasee or any other party for whose acts or omissions any Releasee may be responsible in law or in fact, or any other cause or principle of law, as a result of my participation in “A Journey From Darkness to Light” or any activities in connection with the JCC trip.

This release contains the entire agreement between the parties to this release. This release supersedes any prior or contemporaneous agreements, understandings, and negotiations regarding its subject matter. This release shall be interpreted and enforced in accordance with the laws of the State of New Jersey, and shall be as broad and inclusive as permitted by such laws. If any provision of this release is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and legal effect.

I have carefully read the foregoing release and understand its contents, and acknowledge that this is a release of liability and such is a binding and fully enforceable contract between myself and Federation.

Having consulted, or having had the opportunity to consult, my own counsel as to its meaning and legal effect, I sign this release as my own free act. Please sign: Note: Federation requires that each adult 18 and over whose name appears on the same application, personally sign this security notice. Spouses, partners or roommates, etc., may not sign for one another. In the case of minors (travelers under age 18), we require a signature by the parent for each child. Thank you for your cooperation.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

PHOTO/IMAGE RELEASE

I hereby grant the permission, without reservation, to the JCC of Central New Jersey to take and to use photographs and/or sound/image recordings of me, to describe and to use the same for promotion of good will, public education, and/or fundraising and other related activities of the JCC, and I waive any right to inspect or approve the photograph(s) or finished version(s) of works, including web site, incorporating the photograph(s).

I release the JCC of CNJ, its officers, trustees, agents, employees, independent contractors, licensees and assignees (including photographers), from all claims that I may have or might have, for any cause of action arising out of taking and/or use of the photographs and/or any sound/image recordings, and/or description of the same, be it blurring, distortion, alteration, optical illusion, or use of composite form whether intentional or otherwise, that may occur or be produced in taking of photographs, or any processing toward the completion of the finished product, unless it can be shown that they and the publication thereof were maliciously caused, produced and published solely for the purpose of subjecting me to conspicuous ridicule, scandal, reproach, scorn and indignity.

I recognize that the JCC of CNJ owns the copyright (or may apply for copyright) in these photographs and other works and creations, and I hereby waive any claims I may have based on any usage of the photographs or works derived therefrom in any form, whether it be printed, projected, televised or transmitted via the web, or/and at any time, be it in the present or in the future, including, but not limited to claims for either invasions of privacy or libel.

I am of full age and competent to sign this release. I agree that this release shall be binding on legal representatives, my heirs, assigns, and me. I have read this release and I fully understand its contents.

1st Traveler

Name: _____ Signature: _____ Date: _____

Complete Address: _____

Tel: _____ E-mail: _____ Fax: _____

2nd Traveler

Name: _____ Signature: _____ Date: _____

Complete Address: _____

Tel: _____ E-mail: _____ Fax: _____