

VATICAN PILGRIMAGE REGISTRATION FORM

Date: 21.11.2014 – 24.11.2014, € 425,- Half-board (3 days) per pilgrim

Each pilgrim must complete this form in full, and return it with a non-refundable advance payment of € 100,- per pilgrim

ALL INFORMATION IS REQUIRED

Family Name:

First Name: 1 2.

3. 4.

Address:

Telephone: Residence: Mobile:

Email:

Emergency Contact Name: Tel:

Any additional information if needed:

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Room Preference:

Single Bed (€ 100,- additional) Double Bed Triple Bed

Payment:

A non-refundable advance payment € 100,- per pilgrim should be made on registration. The remaining balance amount € 325,- should be received on or before 9th November 2014

Date:

Place:

Signature

 _____  _____ 

INDIAN CATHOLIC COMMUNITY

Tivoligasse 20, A-1120 Vienna, Austria, Tel: 01 817 42 06

Received from the amount of € in words

..... as advance / balance / full payment for ICC Pilgrimage to Vatican

Date:

Received by:

(For ICC Vienna)