REGISTRATION AND PAYMENT FORM: DERECH MONDAY, AUGUST 28, 2017

Please complete this form, TYPE OR PRINT LEGIBLY, and fax or e-mail immediately.

Then put payment in mail with original form and mail to us immediately.

Mail to: Plane Talk Travel, 11 Washington Avenue, Lakewood, NJ 08701

Telephone: 718-951-6500 or 732-987-9961 / Fax: 732-364-4606 / E-mail: info@planetalktravel.com

Please print name EXACTLY as it appears on passenger's passport Last Name Date of Birth First Name Middle Name Address (in USA) State Zip City Parents' Home Phone Parent Business Phone Fax # Cell# Student's El Al Matmid # Parent Active E-Mail Address PAYMENT OPTIONS: Please fax or e-mail this form immediately with copy of deposit check, and then put check and original form in the mail. All payments and forms must be received in our office by March 27^{th} . If you intend to pay the balance by credit card, please fill out the necessary information below and sign to authorize payment. (Please note there is a \$10 handling fee for credit card payments.) ALL CHECKS SHOULD BE MADE PAYABLE TO PLANE TALK and include student name and name of school. GROUP FLIGHT - OPEN TICKET WITH TWO BAGS A) GUARANTEED EARLY-BIRD - \$1620.58 (includes \$100 check deposit) – immediate payment B) EARLY-BIRD – \$100 check deposit; balance due with post-dated check for May 15th C) ____ LATER PAYMENT -- \$200 check deposit; balance due with post-dated check for June 15th D) LATE BIRD -- \$1670.58 (includes \$100 check deposit) includes only one bag free roundtrip FOR LOS ANGELES PASSENGERS ONLY: I am interested in the add-on (open return for one year): Los Angeles non-stop to Israel LAX/TLV/LAX (add \$260 roundtrip) ____ NY/TLV/LAX (add \$130 one way TLV/LAX) – purchase your own domestic ticket LAX/NY FOR THOSE FLYING IN FROM OTHER CITIES: I am flying in from _____ and (circle one) do / do not need help with the domestic flight. DEVIATION: I will not be traveling on the date of the group flight. I wish to travel on from JFK from Newark To qualify for extra luggage you must comply with Payment Plan A, B or C E) ____ EL AL CLOSED RETURN TICKET RETURN DATE _____ to ___JFK __Newark We will contact you with exact rate for your date F) _____SWISS DATE OF DEPARTURE **CREDIT CARD AUTHORIZATION** hereby authorize Plane Talk (or its vendor) to charge my credit card for the balance due in payment for my son's ticket. (Deposits payable only by check.) I have read and understand the rules of this fare and agree to pay charges as listed. I will not deny any portion of the charges for any reason. MASTERCARD DINER'S (no Discover or debit card) Please circle one: AMEX VISA Card #_____ Expiration _____ Signature of Cardholder _____ Date _____ Phone Number of Cardholder