

**FIAT VOLUNTAS TUA  
REGISTRATION FORM**

Date of Pilgrimage Departure: \_\_\_ / \_\_\_ / \_\_\_      Departure City: \_\_\_\_\_

Name below must match the name as written on the traveler's passport:

Name: \_\_\_\_\_

First: \_\_\_\_\_      Initial: \_\_\_\_\_      Last: \_\_\_\_\_

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_      US Passport #: \_\_\_\_\_

Expiration Date: \_\_\_ / \_\_\_ / \_\_\_      Country of Issuance \_\_\_\_\_  
*Make sure all passports utilized will remain valid for 6 months after your return date.*

Non US Citizen Nationality: \_\_\_\_\_      Passport/Visa #: \_\_\_\_\_

First Name Preferred On Name Tag: \_\_\_\_\_      Gender  M  F

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Your Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_      Emergency Telephone: \_\_\_\_\_

Accommodations are **double** or **triple** occupancy.

Indicate **ROOMMATE** choice here: \_\_\_\_\_

**Payment Options:**

**\$400.00** deposit per-person is required to guarantee space.

Full balance is due not less than **60 days** prior to departure!

**Credit Card Payment** (Check one)  MasterCard  Visa      3-Digit security number on back \_\_\_\_\_

Account Number: \_\_\_\_\_      Expiration Month: \_\_\_\_\_ Year: \_\_\_\_\_

My Signature below is authorization for Fiat Voluntas Tua to charge my credit card.

Sign Here: \_\_\_\_\_      Print Name as shown on card \_\_\_\_\_

**Charge Amount: \$** \_\_\_\_\_

**PAY BY CHECK** – Make Check payable to; **FIAT VOLUNTAS TUA**, and mail to the address below.

**Fiat Voluntas Tua**  
3965 W 83rd St, Ste 153  
Prairie Village, KS 66208  
[www.fiattravel.com](http://www.fiattravel.com)

Phone: 913-642-8185  
Toll Free: 877-Mary4Us (627-9487)  
Fax: 913-642-8046

Total Amount \_\_\_\_\_  
Deposit Paid \_\_\_\_\_  
Remaining Balance \_\_\_\_\_  
Charge Date \_\_\_\_\_