## **Reservation Form**

Print legibly the information below. Your name must be given as it appears on your passport. Your passport must be valid for at least six (6) months after your scheduled return. Please provide a copy of your passport.

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NAME:	NAME:
ADDRESS:	ADDRESS:
CITY / STATE / ZIP:	CITY / STATE / ZIP:
DATE OF BIRTH: / /	DATE OF BIRTH: / /
GENDER:   Male  Female	GENDER: □ Male □ Female
TELEPHONE NO: ( ) (Home)	TELEPHONE NO: ( ) (Home)
TELEPHONE NO: ( ) (Cell)	TELEPHONE NO: ( ) (Cell)
EMAIL:	EMAIL:
Are you a U.S. Citizen?: ☐ YES ☐ NO	Are you a U.S. Citizen?: ☐ YES ☐ NO
Make checks payable to: RIZAL TRAVEL CENTER	Make checks payable to: RIZAL TRAVEL CENTER
Mail check with form to:  ISABEL R. JUAN  5555 NORTH SHERIDAN ROAD, #403	Mail check with form to:  ISABEL R. JUAN  5555 NORTH SHERIDAN ROAD, #403

About Rizal Travel Center: Rizal Travel has been doing pilgrimages for the Archdiocese of Chicago since 1975. It also handled all the travels of Cardinal Bernadin, including the group that went to Rome for his installation as Cardinal.

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