

No refunds can be given after November 15, 2017.  
**Please sign below that you agree to  
this policy:**

**Signature:** \_\_\_\_\_

**Chicago Advent Pilgrimage**  
Thursday, November 30, 2017

**Names:** \_\_\_\_\_

**Address (Include City & Zip)** \_\_\_\_\_  
\_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Emergency Contact Name & Phone Number:**  
\_\_\_\_\_

**Amount Paid:** \_\_\_\_\_

**Method of Payment (We can accept a check made out to Holy  
Family, cash or credit card):**  
\_\_\_\_\_

\*The price for this trip is \$75 per person. This price includes transportation on a coach bus, tours and tips. Lunch will be on your own. Check in will be at 5:45 am at Holy Family in Rockford.