



Registration: Sacred Journey to Egypt – November 19 – December 4, 2022

Facilitators: Dr. Kathy J. Forti & Medium/Psychic - Karen Glass &

Egyptologist - Hares Sayed

NOTE: This registration has 3 parts. The first part is a personal information email to help us better serve your journey. The second part includes your official reservation and deposit form, and the third part is our waiver of liability. The last two forms must be sent and included with your deposit.

Once you are registered, we will send your confirmation and final itinerary information via email. If you are coming with another adult friend or family member, please have each of them fill out a separate application. If you are including a deposit for another person, please indicate this below. **You may sign, scan all forms, and then submit them electronically to Kathy@Trinfinity8.com.** We are required by law to have your physical paper work on file.

A copy of your passport is a must for all internal Egyptian flights. Your passport must be current and not nearing expiration. If it expires 6 months or less prior to the date of departure, the Egyptian Government will not let you enter the country. Please scan it, place it in a JPEG file, and send it via email to Kathy@Trinfinity8.com. We will send you a comprehensive list of what to bring and expect as we get closer to departure day (i.e visas are purchased at Cairo Airport upon entry and no medical shots are required).

Name (on passport): _____ Telephone: _____

Email: _____ Mobile phone : _____

Mailing Address: _____

Are you in the alternative health/healing field? If so, please tell us more: _____

Are you a meditator or familiar with meditation practices? _____

How did you hear about this trip? _____

Have you been to Egypt before? _____ If so, when? _____ How long? _____

Passport #, Country, Expiration Date: _____

Date of Birth: _____

Are you taking any medications? _____

This tour requires significant walking through temples and pyramids. Do you have any chronic health conditions, disabilities, or other conditions which might make it difficult for you physically? _____

If so, please describe: _____

Do you have any meal/eating restrictions? _____

Emergency contact name & telephone: _____

Tour Requested (Choose One): **11 day/10 night** or **16 day/15 night (includes Red Sea)**

Extra Days Needed? (Yes, No, Not sure) _____

Type of Room Requested (Circle One): **Single Double**

FULL PRICE: \$4650 USD - 11 Day/10 Night Tour (per person double occupancy)

\$5500 USD – 16 Day/15 Night Tour (Includes Red Sea – per person double occupancy)

(If you need a private single room, add additional funds (\$600/\$900) = \$5250/\$6400 total tour price depending on availability.)

Both tours include all ceremonies, museums, lodgings, meals, Egyptologist tour guides, entry fees to sites, bottled water during lunch and bus, domestic airfare within Egypt, airport transfers, ground transportation, Nile cruise and boat ride, admissions to temples, and other planned events. The private time access to the King's and Queen's Chamber and the Paws of The Sphinx are included in the above price.

NOT INLCUDED: Domestic airfare to and from Cairo and tips to our drivers, waiters, staff, and Egyptologist (which is usually around \$10 per day or \$110/\$150 per person total) is paid in Egypt.

DEPOSIT: A \$500 non-refundable deposit is required at the time of registration to secure your spot. (The group is limited in size, so don't delay.) The final payment is due 60 days prior to departure (**by or before September 19th, 2022**). Bookings made 30 days prior to departure date require full and final payment immediately upon booking.

If you plan on arriving before the tour arrival date on November 19th, or staying after the tour ends, please let us know to accommodate extra hotel nights. The rate for staying extra days before or after your tour ends at Cairo's Le Meridien Cairo Airport Hotel is \$90 per person, per night double room (\$140 single), with breakfast and taxes included. We appreciate your attention to these details, as it will make our job much easier.

PAYMENT METHOD (Circle One):

1. **U.S. Check:** Payable to **The Gallant Group LLC** (no fees incurred). If you prefer this method of payment, let us know and we will send you our payment address.
2. **Credit Card** (an additional 3.0% use fee is incurred for US; 4.5% for International participants): A PayPal invoice will be sent to you via email to securely use your personal credit card.
3. **Wire Transfer and/or Cash** (no fees incurred): We will contact you with the necessary info to complete your bank transaction or make your deposit to our bank.

Send all signed documents, your signed liability wavier form to Dr. Kathy J. Forti at Kathy@Trinfinity8.com. Also send a copy of your passport and international flight plan to Kathy@Trinfinity8.com

CANCELLATION & REFUNDS:

Cancellations should be received in a written document or via email. Due to high preparation costs, cancellations must be received in writing within 45 days of travel date. If you cancel your reservation, the following fees will apply: Cancellations received more than 30 days prior to departure will have a penalty of \$700 per person; those received between 30 and 25 days will have a 50% return per person; those received between 25-20 days will have a penalty of 75% per person; those received 20 days or less before departure will receive no refund.

INSURANCE: Travel insurance is mandatory and required. *Travel Insured International* offers insurance for trip cost, trip cancellations and interruption, and pays for loss due to unforeseen circumstance, death, injury, illness, or missed flight connections.

REMEMBER: You must sign the liability form (attached) before you are officially registered. Rooms are based on double-occupancy, two people to a room. (We will match you with another group participant if you are a single). This is prime tourist season in Egypt, so a single room request is “per hotel availability” (this applies only to the Mena House in Cairo & the Nile Cruise part of the tour). All other hotels/resorts we will be staying at have single room availability. If you need a private single room, add additional funds (\$600/\$900) = \$5250/\$6400 total tour price depending on availability.

QUESTIONS: Contact Dr. Kathy Forti via email at Kathy@Trinfinity8.com or call 310-709-7221

VOLUNTARY RELEASE and WAIVER OF LIABILITY AGREEMENT

The undersigned, _____ (the “Participant”), acknowledges that he/she has voluntarily applied to participate in a trip to Egypt scheduled from November 19 – December 4, 2022 (the “Trip”) organized by The Gallant Group, LLC, and Dr. Kathy Forti (the “Organizer”). The purpose of the trip is educational in nature.

THE PARTICIPANT IS AWARE AND UNDERSTANDS THAT THE TRIP HAS INHERENT RISKS ASSOCIATED WITH IT, INCLUDING, WITHOUT LIMITATION, ALL GENERAL RISKS ASSOCIATED WITH INTERNATIONAL TRAVEL AS WELL AS SPECIFIC RISKS RELATING TO THE POLITICAL INSTABILITY IN EGYPT, AND THAT THE PARTICIPANT COULD INCURE FINANCIAL OR PROPERTY LOSS, PERSONAL INCONVENIENCE OR BE SERIOUSLY INJURED OR EVEN KILLED. THE PARTICIPANT ATTESTS THAT HE/SHE IS FULLY AWARE OF THE RISKS, HAS VOLUNTARILY DECIDED TO PARTICIPATE IN THE TRIP, AND ASSUMES ANY AND ALL RISKS OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

In consideration for being allowed to participate in the Trip, the Participant hereby irrevocably releases the Organizer and each of the other participants from any and all actions, claims, or demands that the Participant may now have, or may have in the future, for injury, death, property damage, or other loss howsoever arising related to (i) participation in the Trip and its related activities, or (ii) the negligence or other acts whether directly connected to those activities or not, and however caused, by the Organizer. I also agree that I, my assignees, heirs, distributes, guardians, next of kin, spouse and legal representative will not make a claim against, sue, or attach the property of the Organizer in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ORGANIZER, AND SIGN IT OF MY OWN FREE WILL.

PARTICIPANT/RELEASOR:

Signature of Participant: _____

Print Name: _____ Date: _____

Email this form and application, along with payment info, to Dr. Kathy J. Forti at Kathy@Trinfinity8.com.
Phone: 310-7097221