



Cathedral Pilgrimage 2019

8–16 December 2019

REGISTRATION FORM

PERSONAL DETAILS

Title (circle one): Mr, Ms, Mrs, Mx, Dr, Rev

Family Name: _____

First Names: _____

Preferred first name: _____

Date of birth: _____

Postal address: _____

Mobile: _____

Email: _____

EMERGENCY CONTACT

Name: _____

Mobile: _____

Alternate tel: _____

DEPOSIT INFORMATION

Deposit of \$500 will be paid by

cheque, direct deposit

Credit card using the Cathedral mobile app

PASSPORT DETAILS

Passport Number: _____

Name (exactly as on your passport):

Passport Country: _____

Passport Expiry: _____

Place of Issue: _____

Please provide us with a colour photocopy or scan of the ID page in your passport.

SPECIAL REQUESTS

Room share partner (if known): _____

Single room (\$590 fee applies)

Dietary (please specify): _____
