## Hajj & Umrah

REF:

## registration form PLEASE USE BLOCK CAPITALS

FIRST <b>NAME</b>		SUR <b>NAME</b>				
TITLE		GENDER	MALE		FEMALE	
ADDRESS 1		ADDRESS 2				
COUNTY		POSTCODE				
HOME <b>TEL</b>		WORK <b>TEL</b>				
MOBILE <b>TEL</b>		E MAIL				
PROFESSION		MARITAL STATUS				
DATE OF BIRTH		PLACE OF BIRTH				
DATE OF ISSUE		DATE OF EXPIRY				
NATIONALITY		PASSPORT NO.				
ISSUED BY		EMERGENCY CONTACT NO.				
HAVE YO	OU PERFORMED HAJJ/UMRAH BEFORE?	HAJJ	UMRAH		ВОТН	
DO YOU HAVE ANY CHRONIC ILLNESSES?		IF YES, SPECIFY				
SPECIAL REQUESTS OR HEALTH INFORMATION						
FOR WOMEN ONLY.		RAM <b>RELATIONSHIP</b>				
		MAHRAM <b>NAME</b>				
I undertake to adhere to the following conditions in my travel to perform Umrah:  1. I will abide by the law prevailing in the kingdom.  2. I must depart the kingdom by the end of the term of his umra package.  3. Not to work in the kingdom with/without pay.  4. Not to over stay in the kingdom to perform Hajj.  5. And not to miss your return flight.  I confirm by filling this application form that all the details are correct and that I have read, understood and accept the Manasik Tours Ltd Terms and Conditions available to me from the Manasik Tours Ltd Office or Website.  Should, you NOT wish to participate in any Manasik Tours Ltd marketing, please tick this box						
SIGNATURE		DATE				

