

**TRAVELLERS WITH SPECIAL NEEDS:** Passengers with special needs and any dietary restrictions must advise us in writing of this at the time of application. We will make every reasonable effort to accommodate these needs. If assistance is required, it is the sole responsibility of the traveler to secure such assistance. AMPT shall not be responsible for denials of entry or services based on these needs.

All participants are required to comply with all health department, airline and foreign government requirements regarding entry and departure from countries visited. AMPT is not responsible for denials of entry into or exit from countries visited on the pilgrimage. Any required testing for Covid or other diseases is the responsibility of the traveler.

**TOUR PRICE:** The tour price is based on tariffs and rates in effect at the time of execution. AMPT reserves the right to pass on increases imposed by airlines (taxes/fees/fuel surcharges), government agencies, cities, hotels and other suppliers, as well as additional costs caused by fluctuations in currency exchange rates.

**PHOTOGRAPHS:** Participants understand that photographs and video taken during the pilgrimage may be used for advertising and/or archival purposes and grant permission for their image to be used thus.




Fatima, Portugal



Pontevedra, Spain



Santiago de Compostela, Spain



Ave Maria Pilgrimage Tours, Inc.

**DECEMBER 2 - 13, 2025**

**A CENTENNIAL PILGRIMAGE:**

TO MARK THE 100TH ANNIVERSARY OF  
THE FIRST SATURDAY DEVOTION, THE  
VATICAN GRANTED A MARIAN JUBILEE  
YEAR (DEC 10, 2025–2026) TO THE  
PONTEVEDRA SHRINE, HONORING OUR  
LADY'S APPARITION TO SISTER LUCIA.



**Per person: \$3,500 departing from Newark  
Liberty International Airport (Land Only \$2,800)**

**Enclosed is my deposit (\$500 per person) for the 2025 December Fatima-Spain Pilgrimage**

You can make a deposit payment using a personal check, money order, or credit card.

A 3% fee applies automatically to credit card payments, which are accepted for deposits only, with a maximum of \$500 per person.

☐ Enclosed is my check / money order. ☐ Please email me information to pay by credit card. ☐ I will be paying the "land only" price of \$2800.

Name: \_\_\_\_\_ (AS IT APPEARS ON YOUR PASSPORT)

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Passport# \_\_\_\_\_ Country of Issue: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Issue: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_

I will be rooming with: \_\_\_\_\_ ☐ Please find me a roommate. ☐ I will be rooming alone (\$450.00 single supp).

Contact in case of emergency (name/address/phone): \_\_\_\_\_

I have read and I understand the Terms and Conditions. Signature: \_\_\_\_\_