



SERVICE TRIP PARTICIPANT APPLICATION

PERSONAL INFORMATION

Full Legal Name _____ Nickname _____
 Spouse/Parent's Name (if minor) _____ Sex M / F
 Address _____ City _____ State Zip _____
 Home Phone _____ Work Phone _____ Cell _____
 Email Address _____ Preferred Contact: Hm/Wk/Cell/Email
 Occupation _____ Languages Spoken _____
 SS# _____ Team Coordinator, if applicable _____
 Date of Birth _____ Roommate Request _____

PASSPORT & IMMUNIZATIONS

Do you have a Current Passport: **Y/N**
 If yes, please attach a copy
 Passport # _____ Exp _____
 Name as it appears on Passport

 Country of Birth _____

Go to: www.cdc.gov/travel/destinationFiji.aspx for information about immunization requirements, you will be asked to provide an immunization record prior to departure.

TRIP INFORMATION

Requested Trip Dates:
 Preferred: _____
 Alternate: _____

T-Shirt Size (Circle One):
 S M L XL XXL XXXL

AIRLINE TRAVEL PREFERENCES

Preferred Seat _____
 (Aisle/Window/Center)
 Location _____
 (Forward/Rear/Wing/Exit Row)
 Meal _____
 (No preference/Vegetarian, Heart Healthy)

FREQUENT FLYER PROGRAMS

(GCW generally flies Air Pacific who has a partnership with American Airlines and Quantas Airlines)

Program Name _____
 Account Number _____
 Additional Info _____

PERSONAL REFERENCE INFORMATION

Have you ever been on a service trip to a foreign country? If yes, when, where and what service were you performing:

Please give the names of two personal references:

Name _____ Phone _____

How do you know this person? _____

Name _____ Phone _____

How do you know this person? _____

AGREEMENT TO PAYMENT SCHEDULE

Each trip costs \$2700 which includes all hotel, meals and necessary expenses:

Payment Schedule:

- 1. A \$200 non-refundable deposit is due with this application to hold your space.** If for any reason Give Clean Water, Inc. cannot book you on your requested dates, we will issue a refund or transfer your deposit to an upcoming trip.
- 2.** Your first payment of **\$1000** is due 2 months prior to departure
- 3.** Your second payment of **\$1000** is due 1 month prior to departure
- 4.** The final **\$500** payment due 15 days prior to departure.

Payments should be made payable to Give Clean Water and mailed to:

Give Clean Water, PO Box 720953, San Diego, CA 92172

Signature _____

Date _____

For office Use: **Deposit Received** **Copy of Passport**

Please take a moment to tell us how you heard about Give Clean Water:

- Friend/Family Name _____
- Referred by another Organization _____
- GiveCleanWater.org website
- Other, please explain _____
- Internet Search _____