



Team Member Application

Please fill out this form **COMPLETELY**, even if you've been on a trip with us before. We would like to keep all of our information current. Thank you.

Full Name (as you want to be called):.....

Gender: ☐ Male ☐ Female Birth Date:..... Age:

Mailing Address:.....

Home Phone: ()..... Cell Phone: ().....

Email:

Employer:..... Position/Title:

Do you have a passport? ☐ Yes ☐ No Name EXACTLY as it appears on passport:

Passport Number: Country of Issue: Expiration Date:

Emergency Contact Name:..... Relationship:

Emergency Contact Home Phone: ()..... Cell/Work Phone: ().....

Emergency Contact Email:

Spouse Name:

Children(s) Name(s) and Age(s):

I am interested in traveling to Uganda in: ☐ Jan/Feb ☐ May ☐ August ☐ October

Team T-shirt (unisex): ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ Youth Size _____

References

References will be checked prior to acceptance on a UWP team. Please provide us with one personal reference and one professional reference. Be sure to include their email addresses, as email will be our primary mode of communication.

Personal Reference

Full Name:

Mailing Address:

Phone Number: () Email:

Relationship:

Professional Reference

Full Name:

Mailing Address:

Phone Number: () Email:

Relationship:

Experience

Have you ever done humanitarian, volunteer, mission work? Tell us briefly about your experience:

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.....

Have you ever traveled over-seas? ☐ Yes ☐ No

Have you ever raised money to do humanitarian work? ☐ Yes ☐ No

How did you hear about the Ugandan Water Project?

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Tell us a little about WHY you would like travel to Uganda, and why with UWP.....

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How do you envision staying connected to UWP after the trip (volunteer at events, do related work in your field, consulting, mobilizing your community, etc.)?

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Skills and Team Roles

We believe that each one of our team members has something only they can contribute to the team dynamic. It is our desire to plug you into a role within the team that is suited to your skills, aptitude and passion.

Below is a list of Team Roles. Please read each role's description and requirements, and then rate yourself on a scale of 1 to 5 how well you would fit into that role. Please circle the number accordingly.

5 – Sign me up! This is my “sweet spot!”

4 – I would like to do this and feel comfortable in this role.

3 – I would be OK in this role.

2 – I could do this if I must, but it's not my favorite.

1 – Definitely in my “Discomfort Zone.”

1 2 3 4 5	<u>Purser</u>	-Keeps track of team expenses and logs trip receipts -Good with numbers and organized
1 2 3 4 5	<u>Medic</u>	-Carries team med kit and monitors team for any signs of illness/Oversees medical donations and healthcare teaching/Organizes first aid in slums and medical outreach -Some medical experience needed, willing to teach cross-culturally
1 2 3 4 5	<u>Quartermaster</u>	-Makes sure all humanitarian donations are sorted and distributed appropriately and according to planned itinerary -Highly organized and detail oriented
1 2 3 4 5	<u>Photographer</u>	-Photograph project site “shot list” and capture the experience photojournalistic style -Experienced photographer with basic equipment, story teller
1 2 3 4 5	<u>Videographer</u>	-Capture significant moments and experiences to assist UWP in communicating with US sponsors -Amateur to experienced videographer with basic equipment
1 2 3 4 5	<u>Musician</u>	-Lead worship/musical performance for team and in villages -Able to sing and play an instrument, some experience in leading musically
1 2 3 4 5	<u>Pack Mule</u>	-Execute our logistic process for baggage/supply bin transport in airport and onto vehicles in UG -Requires muscles and ability to work well under pressure/chaos
1 2 3 4 5	<u>Assistant Leader</u>	-Support team leader, lead small groups when team divides, provide additional help and leadership to all team members as needed – Be the “Leader of Assisting” -Experience with teams and traveling abroad helpful, lead by example and with wisdom
1 2 3 4 5	<u>Reporter</u>	-Responsible for administering site Impact Surveys at each tank visit -Strong people skills, organization, neat handwriting, enjoys cross cultural communication
1 2 3 4 5	<u>Correspondent</u>	-Create and post photojournalistic updates of team activities/experiences on Facebook/Twitter daily -Strong observation and writing skills
1 2 3 4 5	<u>Child Wrangler</u>	-Coordinate donations/lessons and lead other team members in children's ministry -Must love children, be playful, able to teach a lesson in front of a group
1 2 3 4 5	<u>Teacher & Trainer</u>	-Speak and/or teach during gatherings, conferences, ceremonies -Effective cross-cultural communication using a translator on specific topics, using rich illustration and universal concepts. Content will be developed with Team Leader and Director. Areas of expertise/insight: _____
1 2 3 4 5	<u>Other</u>	What do you do well? _____ _____

Open Response

Spots on our teams are limited and we look specifically for individuals who will be assets as we further our goals and relationships for the organization. Explain why you are a viable candidate and what strengths you will add to the team and the organization.

[illegible]

Medical Release

Every effort will be made to make this trip as safe as possible. However, some portions of this trip will be physically strenuous. Travelers are required to carry their own luggage. Rest rooms are not always readily accessible and may be primitive at times. Portions of the trip may require considerable amounts of walking. The weather in Uganda can be very hot and humid and can affect your overall strength and energy. Travelers will be eating food native to the culture, which may affect your digestive system.

Please be aware that medical facilities in Uganda are limited and may not be comparable to what is available in the United States. If needed, we may require a letter from your physician.

Limitations

Please list any physical or medical limitations that may affect your ability to perform?

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Do you have any existing medical conditions that could require extensive medical treatments?

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Have you had any surgery, major health problems (physical/mental/emotional) or been under a physician's care within the past 3-5 years?

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Medications

Please list ALL prescription and non-prescription medications your are currently taking (including dosage):

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Allergy Information

Do you have allergies to any medications?

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Do you have special food requirements or food allergies?.....

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Do you have any other allergies (e.g. bee stings, etc.)?.....

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Have you been prescribed an Epi-Pen? If so, for what specific allergens?

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Team Participation and Travel Agreement

While we make every possible effort to have your trip run smoothly, the nature of traveling to/from and within Uganda can present challenges, as with travel to many developing nations. Please understand that circumstances may change without notice or explanation and we will do our best to keep you informed.

- I agree to work with the team as a whole and work cooperatively with each individual on the team. I also agree to respectfully follow all directions from UWP leadership.
- I understand that I am responsible for the full cost of the trip before departure to Uganda. In the event that my fundraising goal is not met, I agree to personally pay any remaining balance before departure. The total trip fee is \$3500. This includes round trip airfare from Rochester NY to Uganda, entry visa fee, in-country transportation, housing, meals, travel insurance and project programs. It does not include passport fees, immunization costs or spending money.
- Funds are due according to the following schedule:
\$200 deposit due with application. \$700, \$2000, \$3500 total funds due 13 weeks, 8 weeks and 2 weeks prior to trip. A schedule with deadlines will be given to you once you have received official team placement.
- In the event that I exceed my fundraising goal, excess funds will be transferred to the general fund and applied toward the expenses of the trip and other team members at the Director's discretion.
- If I fall short of my fundraising goal or am unable to participate in the trip, the money raised for my expenses will be transferred to the general fund and applied toward the expenses of the trip and other team members at the Director's discretion.
- In the event of a personal emergency or conflict that requires a change in my travel itinerary, I understand that it is my responsibility to pay any additional costs/fees associated with this change.
- The information on this form and all attached forms is accurate to the best of my knowledge.

Applicant Signature: Date:

Parent/Legal Guardian Name (please print):
(Applicants under 18yrs)

Signature of Parent/guardian:

☐ I have enclosed my \$200 deposit. Please make check payable to Ugandan Water Project.

Mail Application and Deposit to:

Ugandan Water Project
2648 Rabbit Run
Bloomfield NY 14469

Got Questions?

Megan Busch
Trip Coordinator
(585) 451-8563

trips@ugandanwaterproject.com