

TEAM MEMBER APPLICATION

Hey there! We're thrilled that you want to come see our work up close and personal in Uganda. Just think— not too long from when you're filling this application out, you could be on your way to help us bring clean water to a new community, driving down a rusty, red dirt road under the bright Ugandan sun. Pretty exciting, isn't it?

Before you get there, we need you to fill these forms out <u>completely</u>, even if you've already been on a trip with us. This helps us keep our information as up-to-date as possible. Thanks!





THE BASICS

Have you traveled overseas before? \square Yes \square No

Full Name (as you want to be called):		
Gender: ☐ Male ☐ Female Birth Date:		Age:
Mailing Address:		
Home Phone: ()	Cell Phone: ()
Email:		
Best way to contact you: ☐ Home Phone ☐ Ce	ll Phone (call) ☐ Cell P	hone (text)
ployer: Position/Title:		
Do you have a passport? □Yes □No		
Name EXACTLY as it appears on passport:		
Passport Number:Cou	ntry of Issue:	Expiration Date:
Emergency Contact Name:	Relations	ship:
Emergency Contact Home Phone: ()	Cell/Work	Phone: ()
Emergency Contact Email:		
Spouse Name:		
Children(s) Name(s) and Age(s):		
I'm interested in traveling to Uganda in: ☐ Jan/Feb	☐ July/August	
T-shirt Size (unisex): ☐ Small ☐ Medium ☐Large	e □ X-Large	
TRAVEL & HUMANITARIAN EXPERIENCE		
Have you participated in any humanitarian, voluntee	er, or mission work before?	☐ Yes ☐ No



Have you raised money to do humanitarian work before? \square Yes \square No
If you've answered yes to any of the questions above, tell us briefly about your experience(s).
UGANDAN WATER PROJECT & YOU
How did you hear about the Ugandan Water Project?
Tell us a little about why you would like to travel to Uganda with us.
How do you see yourself staying connected to UWP after the trip? Examples: volunteering at events, doing related work in your field, consulting, mobilizing your community, fundraising, etc.



SKILLS & TEAM ROLES

We believe that each person who comes on one of our trips has a valuable set of skills, personality traits, and interests that they contribute to the team dynamic. As we look to assign responsibilities and roles for each team member, we want to make sure that we plug you into places and roles where you can thrive and grow.

We've listed some of common team roles below. Please read the description for each one, then rate yourself on a scale of 1 to 5 based on how well you think you would fit into that role. Here's how the number rating system breaks down:

- 5- Sign me up! This is my sweet spot.
- 4- I'd like doing this and would feel comfortable in this role.
- 3- Sure, I'd be okay in this role.
- 2- I mean, if I had to, I could do this role.
- 1- Not for me. This role is definitely out of my comfort zone.

1 2 3 4 5	Purser -	Helps record & keep track of team expenses Good with numbers & highly organized
1 2 3 4 5	Medic -	Carries team med kit, monitors team for signs of illness, oversees medical donations to team Some medical experience preferable, willingness to teach cross-culturally
1 2 3 4 5	Quartermaster -	Ensures all donations and field materials are sorted and packed according to the team itinerary Highly organized and detail oriented
1 2 3 4 5	Photographer/ - Videographer -	Photographs project site "shot list" and significant team moments/experiences Experienced photographer with basic equipment preferred LINK TO PORTFOLIO/WORK SAMPLES:
1 2 3 4 5	Musician - -	Leads worship/musical performance for team in villages Able to sing and play an instrument, some experience in leading musically INSTRUMENTS:
1 2 3 4 5	Pack Mule -	Manages baggage/supply bin transport in airport and in Uganda Must be able to lift 50 lbs
1 2 3 4 5	Journalist - -	Conducts interviews during field visits and assists with story capture Strong people skills, organization, neat handwriting, enjoys cross-cultural communication
1 2 3 4 5	Reporter -	Creates and posts social media updates of trip activities across UWP platforms Strong writing skills
1 2 3 4 5	Child - Wrangler -	Coordinates relevant donations and leads other team members in children's games Good with children, playful, able to teach a lesson in front of a group



1 2 3 4 5	Teacher/ - Trainer -	Helps UWP staff teach on hygiene, sanitation, and proper water filter use Comfortable speaking in front of crowds, dynamic use of illustrations, enthusiastic		
1 2 3 4 5	Lifeguard - -	Pays special attention to the emotional/spiritual wellbeing of team members Sensitive to others, friendly, attentive listener & observer		
1 2 3 4 5	Medic -	Carries team med kit, monitors team for signs of illness, oversees medical donations to team Some medical experience preferable, willingness to teach cross-culturally		
1 2 3 4 5	Other -	Anything else you do well that we didn't hit on above?		
References will be checked prior to your acceptance to a UWP team. Please provide us with one personal reference and one professional reference, and be sure to include their email addresses since this will be our primary method of communicating with them. Personal Reference Full Name: Mailing Address: Phone Number: () Email:				
kelationship				
Professional Reference				
Full Name:				
Mailing Address:				
Phone Number:	()	Email:		

Relationship: _



MEDICAL RELEASE

Every effort will be made to make this trip as safe as possible. However, some portions of this trip will be physically very hich

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 whot and humid and can affect your overall strength and energy. Travelers will be eating food native to the culture, who 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.
Do you have any existing medical conditions that could require extensive medical treatments?
Have you had surgery, major health problems (physical/mental/emotional) or been under a physician's care within the past 3-5 years?
Medications Please list ALL prescription and non-prescription medications you are currently taking (including dosage):
Allergy Information Do you have allergies to any medications?
Do you have special food requirements or food allergies?
Do you have any other allergies (e.g. bee stings, etc.)?

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



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 V	Water Project.

Mail Application and Deposit to:

Ugandan Water Project PO Box 262 Lima, NY 14485

Have Questions? Marina Cull, Trip Coordinator (585) 3150-6160