



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 completely, 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

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 Cell Phone (call) Cell Phone (text) Email

Occupation: _____ Position/Title: _____

Social Media Handles: Facebook _____ Instagram: _____ Other: _____

Do you have a passport? Yes No

Name EXACTLY as it appears on passport: _____

Passport Type: _____ Passport Number: _____ Country of Issue: _____

Expiration Date: _____ Date of Issue: _____

Emergency Contact Name: _____ Relationship: _____

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

Emergency Contact Email: _____

Marital Status: Single | Married | Divorce/Separated | Widowed Spouse Name: _____

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

T-shirt Size (unisex): Small Medium Large X-Large

ADDITIONAL INFORMATION FOR VISA APPLICATION

Have you been denied a Visa before? Yes No

Have you been deported before? Yes No

Have you been convicted in any country? Yes No

Are there any criminal proceedings against you? Yes No

Are you currently experiencing or being treated for any mental illness? Yes No

Travel History: (past 5 countries visited): _____



4. What do you hope to receive from this team and the experience?

5. What is one specific way you are preparing for the Vision Trip?

6. Name a song title and artist that is one of your "anthems" for this season:



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. Restrooms 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.

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. The total trip fee is \$3500. This includes round-trip airfare from an east coast point of departure 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, \$2,000, \$3,500 total funds due 15 weeks, 12 weeks, and 4 weeks prior to departure.
- 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 18 years)

Signature of Parent/Guardian: _____

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

Email or mail application:

trips@ugandanwaterproject.com

Ugandan Water Project, P.O. Box 262, Lima, NY 14485

Have questions?

Justin, Team #30 Trip Coordinator, UWP Intern

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