TRIP APPLICATION



Are you ready to be part of our team?

Full Name:

Be sure all sections of this form are complete and accurate before submitting. You will receive an email from us once your application has been received.

Please submit the following form via email at changinglives@hopeforkenya.org or send a paper copy via mail to Hope for Kenya, P.O. Box 27, 97 Main St., Corinth, NY, 12822. We look forward to having you on board!

Street Address:					
City:	State:	Zip:	Phone:		
Cell phone:		Email:			
SSN:		Date of birth:			
Marital Status:					
Father/Guardian's Name (if under 18):					
Address:					
Cell phone:		Email:			
Mother/Guardian's Name (if under 18):					
Address:					
Cell phone:		Email:			
Do you have a passport?		If yes, passport number:			
Applicants under the age of 15 can attend a trip if accompanied by a parent or legal guardian. The following questions help us to get to know our team members before we begin the travel process. It is not required that you have experience in any of the areas below. It simply allows us to see what gifts, passions, and skill sets are represented on our teams.					
List any cross-cultural and/or travel experience you've had, if any. Include the countries you have visited and the purpose of your trip. If this is your first time, we are excited to take this journey with you!					

List any other mission/humanitarian aid experiences you've had, if any. Include organization and responsibilities.			
Do you have any building or construction experience? If so, include skill sets and experience.			
Do you have any teaching or mentorship experience? If so, include skill sets and experience.			

List any other skill sets, character traits, and experiences you feel would make you a valuable asset to our team. Do you have any hobbies you would like to share with our students or passions related to the work we do in Kenya? We encourage all our team members to share something they love with our students, big or small.			
Please list any pertinent medical conditions or health concerns so we can provide you with any additional support you may need within our means.			
Please list any allergies you may have and/or dietary restrictions.			

Disclaimers

We reserve the right to accept or decline any applications to a missions team.

We reserve the right to cancel any trip due to lack of interest, unforeseen circumstances, safety concern, or any other reason.

Once air fare has been purchased we cannot refund the donation for the airfare.

If another application is needed, please visit our website.

My signature (and, if I am under 18, the signature of my parent/legal guardian) signifies that in the information I have given is accurate and true to the best of my knowledge:

Applicant's Signature:	Date:
Parent/Legal Guardian Signature:	Date:

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS APPLICATION!

Contact us anytime with any questions you have about trips and travel by emailing changinglives@hopeforkenya.org
We will be in touch when your application has been reviewed.