

**Presbytery of Giddings-Lovejoy
Joining Hands Partnership Visit to Peru
August 6-14, 2010**

APPLICATION FORM

(Deadline is May 15, 2010 with \$500 deposit.)

PERSONAL DATA

Name (as it appears in your passport) _____

Address _____

City _____ State _____ ZIP _____

E-mail _____ Phone numbers _____

Gender _____ Professional Position _____

Your Congregation _____ City _____

PASSPORT INFORMATION

Date of Issue _____ Place of Issue _____

Passport Country _____ Number _____

Expiration Date _____

Birthplace _____ Birth Date _____

HEALTH INFORMATION

What is your general health? _____ Excellent _____ Good _____ Fair

Walking is required on this trip. Are you able to walk long distances on uneven surfaces and steps? _____ Yes _____ No

On this trip, you will experience large changes in altitude in short amounts of time. (Sea level to over 15,000 feet in about 4 hours.) Are you prone at altitude sickness or foresee any other difficulties because of these extreme altitude conditions? _____ Yes _____ No

Do you smoke? _____ Yes _____ No

Do you have _____ allergies? _____ dietary restrictions?

_____ physical challenges? _____ emotional challenges?

If yes, please explain.

Are you currently under a physician's care and/or receiving prescribed medication? ___ Yes ___ No

If yes, please explain and list relevant medications.

Are you covered by medical and accident insurance? ___ Yes ___ No

Does it cover overseas travel? ___ Yes ___ No

Insurance company _____

Insurance Telephone Number (when traveling overseas)

Policy holder _____

Policy number _____

In case of emergency, who should be contacted?

Name _____ Relationship _____

Phone Number _____ Address _____

ADDITIONAL QUESTIONS

A. What are your reasons for desiring to go on this trip?

B. Do you agree to do post travel interpretation of your experience?
 Yes No In what way?

C. Describe skills, interests, or hobbies (like photography) that might be helpful on the trip and its interpretation afterwards?

D. Do you speak Spanish? Yes No

E. Have you ever lived in or traveled to other countries? If so, describe your experiences including countries and dates.

F. Please use additional paper to share other important information.

FOR MORE INFORMATION about this trip please contact Mark Strothmann at 314-395-8242 or markstrothmann@charter.net. Mark is the Coordinator for Joining Hands in Giddings-Lovejoy Presbytery.

APPLICATION PROCESS AND COST

The Coordinating Team of Joining Hands in the Presbytery of Giddings-Lovejoy will select all participants for this trip after the May 15, 2010 application deadline. Preference will be given to first time travelers to Peru.

The cost for this trip is \$1,500. This price is subject to change. With this application, please include a \$500 deposit made payable to the Presbytery of Giddings-Lovejoy. This deposit will be returned if you are not selected or if you cancel before airline tickets are purchased. Balance is due at first orientation meeting. A limited amount of scholarship money is available. Please contact Mark Strothmann for more information.

An optional visit to Machu-Picchu or the Amazon at additional expense is possible August 14-16. Are you interested in either possibility?
___ Machu-Picchu ___ Amazon ___ No

COVENANT AGRREMENT

I agree to complete the required study and orientation and post-trip meetings for this trip. I will also participate fully in all aspects of the trip while in Peru and will use the insight and knowledge gained for furthering the goals of *Joining Hands* both in the United States and in Peru. I am willing to sign a *Hold Harmless, Waiver of Liability, and Emergency Medical Care Authorization* if accepted for participation on this trip. I will also fulfill all my financial obligations for this trip.

SIGNED _____ DATE _____

Please return form with a \$500 deposit by May 15, 2010 to:

Cindy Corley
Presbytery of Giddings-Lovejoy
2236 Tower Grove Avenue
St. Louis, MO 63110

Make check payable to *The Presbytery of Giddings-Lovejoy*. (Please mark your check "*Joining Hands 2008 Peru Trip*.")

Session Endorsement

The Session of _____ endorses

_____ as a participant on the 2010

Joining Hands Trip to Peru.

PASTOR or CLERK OF SESSION _____ DATE _____