



**VOLUNTEER & SERVICE TEAM
APPLICATION 2011-2012**
CONCEPCION DEL NORTE, HONDURAS

PERSONAL INFORMATION

Name:

Date of Birth:

Address:

Home Phone:

Cell Phone:

Email Address:

MEDICAL INFORMATION

Allergies:

Medications:

Medical Issues:

EMERGENCY CONTACTS

Name:

Phone:

Address:

Name:

Phone:

Address:

Name:

Phone:

Address:

QUESTIONNAIRE:

Please tell us a little about yourself!

1. Have you been on a mission or service trip before? Have you volunteered in your local neighborhood?

2. Do you have any medical training? Teaching background? Construction/technical skills? Background in horticulture?

3. How did you hear about this volunteer trip to Honduras?

4. Do you speak Spanish?

5. Why would you like to be considered for this service trip to Honduras?

6. Personal Statement:



**VOLUNTEER & SERVICE TEAM
APPLICATION 2011-2012**
CONCEPCION DEL NORTE, HONDURAS

Daisy's Children encourages all who have a passion for helping others and a desire to make a difference in the life of a child to apply. This questionnaire is a useful tool to allow us to learn a little about our volunteers and also to see if they possess skills we may be looking for to aid in time sensitive or specific needs projects.

Daisy's Children reserves the right to decline an application as it sees fit.

Please note if you are a minor and would like to be considered for a volunteer trip , please contact a member of Daisy's Children for more information or email info@daisyschildren.org.

TRIP COSTS AND PAYMENT REQUIREMENTS

Each group or service team is responsible for making their own travel arrangements to the airport in San Pedro Sula, Honduras, which includes payment for this part of the journey. You will be met at the airport by your trips ground leader. The anticipated cost for ground expenses is \$600 per person. This will include lodging, meals, and ground transportation. Teams may choose to add on additional itinerary days or excursions through recommended partners. We ask that \$300 be paid within 60 days of your arrival date, with the final \$300 payable within 30 days of your arrival date. This allows us to fully prepare for your arrival.

* By signing below you are agreeing to all the terms set forth in this application to be considered as a member of a volunteer team for Daisy's Children.

Applicants Signature

Date

Daisy's Children thanks you for your interest and looks forward to working with you!

All applications can be emailed or mailed to the addresses below:

www.daisyschildren.org | info@daisyschildren.org | PO Box 487, North Berwick, ME 03906 | 207. 651. 5558