



# BAKERSFIELD SISTER CITY PROJECT CORPORATION

## PART 1: APPLICATION FOR TRIP TO WAKAYAMA, JAPAN, JUNE 6-15, 2018

- ☞ Application & parent consent form, along with a non-refundable deposit of \$150 (needed to hold your seat on the airlines) are due by Friday, February 23, 2018.
- ☞ The balance of the airfare & land costs will be due on or before Friday, April 20, 2018.

Legal name (*as shown on passport*): \_\_\_\_\_

Passport expiration date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Age \_\_\_\_\_

School currently attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Work number: \_\_\_\_\_ Cell number \_\_\_\_\_ Email: \_\_\_\_\_

Father's name: \_\_\_\_\_

Work number: \_\_\_\_\_ Cell Number \_\_\_\_\_ Email: \_\_\_\_\_

Names & ages of brothers & sisters:

\_\_\_\_\_

Please list interests, school activities/involvement (information will be provided to host family who would like to know a little about you):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is student taking any medications? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please attach a list.

Does student have any allergies? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please attach a list.

Are you or your family a member of Bakersfield Sister City Yes \_\_\_\_\_ No \_\_\_\_\_

Has student been to Japan or Korea with the Sister Cities program before? Yes \_\_\_\_\_  
No \_\_\_\_\_

Has student traveled without parents before? Yes \_\_\_\_\_ No \_\_\_\_\_

Has your family served as a host family to an international student?

Yes \_\_\_\_\_ No \_\_\_\_\_

Is your family willing to host a Wakayama student in your home (August)?

Yes \_\_\_\_\_ No \_\_\_\_\_ (NOTE: A "NO" answer may disqualify you from this trip.)

## PART 2: ACADEMIC RECOMMENDATION

**Teacher/Counselor Reference:** Please have a current Teacher or Counselor attach a signed and dated recommendation of your ability to represent the City of Bakersfield and Bakersfield Sister City as a Bakersfield Sister City Youth Ambassador. An academic standing should be included in this recommendation. Please list a contact number or email for Teacher/Counselor.

Teacher or Counselor (please print): \_\_\_\_\_

Subject & grade: \_\_\_\_\_ School: \_\_\_\_\_

Email or telephone: \_\_\_\_\_

## PART 3: STUDENT ACCEPTANCE

- **I understand that I am representing Bakersfield Sister City and the City of Bakersfield, as well as the United States of America. I realize my behavior reflects upon these groups and will do my best to behave in a manner that will make my parents, my school and my city proud.**
- **I will follow all rules of conduct set forth by Bakersfield Sister City.**
- **I agree to attend all orientations in preparation for the trip.**
- **I agree to help to host students from Wakayama when they visit in 2018.**
- **I have attached a short essay of why I want to visit Wakayama, Japan as part of the REQUIRED documents necessary for consideration of my application.**
- **I agree to respect and mind the chaperones, my host family, and the people of Wakayama who organize this visit.**
- **I understand that any misconduct on my part will cause immediate notification of my parent/guardian at their expense. I will comply with any disciplinary action agreed upon by parent/guardian and chaperone.**
- **I have attached all necessary documents and have read and understand this application and my commitment as a Youth Ambassador.**

Youth Ambassador Signature \_\_\_\_\_ Date: \_\_\_\_\_

## Part 4: PARENT PERMISSION

### RECOMMENDATION

**I understand my child will be traveling under the guidance of a chaperone(s) designated by Bakersfield Sister City Project Corporation.**

**I am confident my child will conduct himself/herself in a respectful manner and that I/we will be contacted immediately, at my/our expense, of any misconduct that is unbecoming of a Youth Ambassador and will abide by any actions necessary to amend the issue.**

### PERMISSION AND RELEASE OF CLAIMS

**I, \_\_\_\_\_, legal parent or guardian of**

**\_\_\_\_\_, give my permission for him/her to go to Wakayama, Japan June 6, 2018 – June 15, 2018, and to participate in all activities. I hereby release Bakersfield Sister City Project Corporation and the City of Bakersfield, its staff and volunteers of any liability in the event of accident or injury.**

**(NOTE: A MORE DETAILED RELEASE FORM AND MEDICAL INSURANCE INFORMATION WILL BE REQUIRED IF YOUR CHILD IS ACCEPTED TO PARTICIPATE IN THE TRIP).**