



one vision

INTERNATIONAL

Traveler and Medical Information

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trip participation

Traveler Profile

Trip details

TRIP LOCATION + DATES _____

Personal Information

NAME (full legal name as it appears on your passport)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

(home) _____ (cell) _____

E-MAIL ADDRESS _____

DATE OF BIRTH (month/day/year) _____

Passport Information

COUNTRY OF BIRTH _____

COUNTRY OF CITIZENSHIP _____

PLACE OF ISSUE _____

PASSPORT NUMBER _____

EXPIRATION DATE _____

Frequent Flyer Program

AIRLINE _____

PROGRAM NUMBER _____

SPECIAL NEEDS / CONSIDERATIONS _____

trip participation

Traveler Profile

Tell us about yourself*

Please write a short description of your relationship with Christ and how that has led you to be a part of this trip. (Attach additional pages if necessary.)

Horizontal lines for writing a short description of your relationship with Christ.

*Please Attach a Photo (This can be a copy of your passport photo or another photo of yourself.)

Deposit

Please attach your \$300 non-refundable deposit to this sheet and sign the following statement:

I understand that my deposit is non-refundable and non-transferable. I commit to be a part of this trip and fulfill my financial obligations to One Vision International. I understand that One Vision is a non-profit charitable organization and, in the event that I cannot go on this trip, I must cover the additional expenses that have already been incurred at the time of my cancellation (such as plane tickets, hotel rooms, etc.). In case of emergency, additional charges for care and transportation will be the responsibility of the participant. I commit to meet all deadlines to the best of my ability, attend informational meetings, and follow the instruction of my trip leaders. I understand that details may not always be available ahead of time, that plans may change, and that decisions may need to be made quickly. I promise to be as flexible and understanding as possible, recognizing that my leaders and the other participants promise to do the same. Above all else, I will represent Christ to the best of my ability.

SIGNATURE _____ DATE _____

trip participation

Medical Release and Liability Form

Trip participant information

NAME _____

(List additional contact information on Traveler Profile page)

Emergency Contact

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

RELATIONSHIP _____

PHONE (home) _____ (cell) _____

I, _____, understand that in the event medical treatment is required, I give my permission to the persons on this mission trip to secure the services of available physicians, nurses, or medical personnel to provide necessary care and treatment required for my well-being. I understand that a team member will be required to accompany me for medical treatment and remain with me until I can return to the group or return home to the United States.

I, _____, release any liability of any accident or injury to myself from any part of this ministry, or from any member of the mission team or ministry team. I will not hold One Vision International liable for any instance of injury or accident while I am part of a mission team serving in the United States or in any other country.

SIGNATURE _____ DATE _____

trip participation

Medical Release and Liability Form

Medical Information

Please list any medical allergies, medications being taken, medical problems or other pertinent information:

Employer Information

EMPLOYER NAME _____

EMPLOYER ADDRESS _____

CITY _____ STATE _____

SOCIAL SECURITY NUMBER _____

NAME OF INSURANCE COMPANY _____

INSURANCE POLICY NUMBER _____

trip participation

Checklist of Suggested Items to Pack

Documents

- Passport
- Extra Photocopy of Passport
- Copy of vaccination records (yellow cards from the Health Department)

Luggage

- Carry-on, fanny pack/purse or passport satchel to keep documents on your person at all times
- Checked luggage (wheeled often preferred)
- Backpack or small bag to take during the day to the job site
- Checked One Vision duffel bag (pre-packed)

Clothing

- Long shorts or light-weight pants for each day at the orphanage
- T-shirts or light-weight shirts
- Something comfortable to wear when you return to the hotel for dinner
- Dress, khakis, button-down shirt, etc. for Sunday
- Pajamas
- Socks and underwears (clean set per day)
- Shower sandals
- Light-weight rain jacket
- Walking shoes or sandals
- Something clean to travel home in

Personal items

- Pillow case, inflatable pillow (optional)
- Bath towel(s)
- Washcloth(s)
- Liquid body soap, shampoo and other personal care items
- Hand sanitizer
- Hand wipes
- Hair dryer
- Makeup (optional)
- Bug repellent
- Personal medicine (**be sure to pack prescribed medications in your carry-on luggage in a labeled bottle**), pain relievers, meds for stomach/diarrhea problems
- Malaria prevention (if taking)
- Small First Aid kit

Additional important items to bring

- Spending money for souvenirs and meals in the airport(s); approximately \$100
- Bible
- Story cloth
- Camera, video camera, extra batteries
- Journal
- Flashlight
- iPod
- Clean plastic bag to bring home dirty clothes
- Bandana/cloth for sweat