Date	

Please attach passport copy

to Application

1 Application per traveler

## Rotary Friendship Exchange

## Participant Application/Questionnaire District 5360

## **PLEASE TYPE OR PRINT**

Exchange Country / District:					
Exchange dates:					
Travel before/aft	ter exchange, dates/location:				
Rotarian Name:	Nickname				
Partner Name: _	(Full Legal Name EXACTLY as it appears on your passport				
	(Full Legal Name EXACTLY as it appears on your passport		e(If applicable)		
Home address:			Province		
Home phone	Cell	email address			
	Exp.Date				
In case of emerg	ency, contact name, address, phone with ar	ea code (other than trav	el partner)		
Rotary Experience: Home Rotary Club:		Years in Rotary			
Rotary position	ons you currently hold:				
Rotary position	ons you have held:				
Professions:					
Have you ever pa	articipated in RFE (enter place & year)?				
Have you ever ho	osted inbound RFE (enter group & year)?				
Have you been d	eclined previously because of over-subscrip	tion (enter group & year)	?		
Are you prepared	d to help host an incoming RFE team from th	ne country you are visiting	;?		
Will your club ho	est the incoming RFE team from the country	you are visiting?			
Have you hosted	RFE, RYE, GSE events (explain)?				
	h limitations/allergies- pets or food restriction				
Do you smoke?	Do you prefer	a smoke-free environme	nt?		
	s:				
Signature of Rotarian (or Partner):		Date:			
Signature of Club President:		Date:			