

***Rotarians & Friends***  
***Rotary Wheels for Learning Cambodia Bicycle Distribution Trip***  
**January 23 - February 12, 2013**

**Team Participant Application Form**

Team participant name as it appears on your passport: \_\_\_\_\_

Name you prefer (if different than above): \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: F M

Occupation: \_\_\_\_\_

Passport number: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Passport expiry date \_\_\_\_\_

**Note: must be valid for 6 months past departure date from project**

**Emergency Contact #1:** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell)

**Emergency Contact #2:** Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell)

Food allergies/dietary considerations: \_\_\_\_\_

Foreign Countries Visited: \_\_\_\_\_

Prior International Work: \_\_\_\_\_

Motivation for participating in a Rotary experience: \_\_\_\_\_

\_\_\_\_\_

Skills, talents, and areas of expertise (eg. Construction, medical, educational, artistic, musical, entertainment): \_\_\_\_\_

\_\_\_\_\_

Language(s) spoken and level of fluency: \_\_\_\_\_

Do you plan to take a side trip before or after: \_\_\_\_\_

**Preferred accommodation** – Please check one:

- Single or Twin room – NOT sharing
- Twin room – Sharing with another single person
- Double room with one large bed (when available)
- Double room with two single beds

**Flight # and time of arrival to Phnom Penh.** You will be met by a team volunteer at the Airport. (IF you don't have your air ticket booked yet, please email this information when you have it to: [rotarywheelsforlearning@gmail.com](mailto:rotarywheelsforlearning@gmail.com) or phone Lisa McCoy 705-687-8538.

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A special **Team T-Shirt** will be made for each participant and paid for from the common funds. Please indicate your shirt size: \_\_\_\_\_

Attached is my deposit in the amount of \_\_\_\_\_. Cheques should be made payable to 'Rotary Club of Gravenhurst'- In Memo Field: 'RWFL TRIP'.

**Mail to: Rotary Club of Gravenhurst, P.O. Box 888, Gravenhurst, Ontario, P1P 1V2**

It is understood that the \$300.00 is non-refundable if we cannot replace you with other team members who are on our waiting list. Deposit funds will be used to pay for common trip expenses.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_