

2012 March of the Living (UK) Limited Application Form



CONTACT INFORMATION

FIRST NAME

MIDDLE INITIAL

LAST NAME

NAME ON NAME TAG

GENDER

EMAIL ADDRESS

HOME PHONE NUMBER

BUSINESS PHONE NUMBER

MOBILE PHONE NUMBER

ADDRESS

CITY

POSTAL CODE

PERSONAL INFORMATION

(Your passport should be valid at least through October 2012)

FULL NAME AS IT APPEARS ON PASSPORT

DATE OF BIRTH (MM/DD/YYYY)

COUNTRY OF BIRTH

PASSPORT NUMBER

PASSPORT EXPIRY DATE



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EMERGENCY CONTACT INFORMATION

Emergency contact #1

FIRST NAME

LAST NAME

RELATION TO YOU

EMERGENCY EMAIL

EMERGENCY PHONE NUMBER

SECOND PHONE NUMBER

Emergency contact #2

FIRST NAME

LAST NAME

RELATION TO YOU

EMERGENCY EMAIL

EMERGENCY PHONE NUMBER

SECOND PHONE NUMBER

ALLERGIES/ASTHMA/HEALTH

DO YOU HAVE ANY FOOD ALLERGIES? PLEASE LIST IN FULL.

DO YOU HAVE ANY OTHER ALLERGIES? PLEASE LIST IN FULL.

DO YOU HAVE ANY DIETARY CONCERNS? PLEASE LIST IN FULL.



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PARTICIPANT STATEMENT OF UNDERSTANDING

The March of the Living is an intense and demanding physical and emotional experience. I have evaluated my ability to participate based on the following factors:

Insurance

MOTL participants are expected to make their own arrangements as regards insurance for the trip.

Cancellation

No monies will be refunded for cancellations made after 28 February 2012.

Social environment

MOTL participants will be members of up to one bus group of people. The group will eat, travel, and participate in activities together for the entire duration of the trip.

Activity

As you would expect of a trip of this nature, it can be emotionally draining. The programme is also quite packed, so anticipate some long days. If you have issues concerning your physical mobility, please contact us before applying.

Medical Facilities

The medical facilities available for participants will cover only acute illness and accidents. There are no facilities available within the framework of the MOTL for the treatment of chronic disturbances. If medication is required while under the auspices of the program, it is advisable that participants travel with a written prescription for each medication. Since medication is often not available under the same trade name as in the country of origin, the full pharmacological name of all medicines and drugs should be supplied. In any event, participants should bring an extra supply of the required medicine with them.

In order to ensure your comfort and safety, please let us know of any medical conditions or concerns you have in the space provided below:

Education

All participants receiving subsidy must attend a pre-trip seminar and a post-trip seminar.

I am fully aware of the social environment and activity levels inherent in participating in this program and I believe that I am physically and mentally capable of handling the intensity of this program.

Name of Participant

Signature of Participant

Date

PAYMENT OPTIONS

Payment for your trip can be made either by sending a cheque made payable to March of the Living UK in an envelope addressed to March of the Living 2012, 1 Chalgrove Gardens, London N3 3PL

or by bank transfer to:

Bank	Cater Allen Private Bank
Sort Code	16-57-10
Account Number	54885863
Account	Gerald Edelman client account re: March of the Living