

Wakatipu Youth
TRUST



International Cultural Experience Programme



Application Form 2017

This form must be submitted by 5pm Friday 24th March 2017 to Wakatipu Youth Trust

P: 03 442 8115

E: info@wakatipuyouthtrust.co.nz

W: wakatipuyouthtrust.co.nz

Shotover House, 7 Shotover Street

PO Box 1948, Queenstown 9348

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This application must be submitted to the attention of *Wakatipu Youth Trust* either by email info@wakatipuyouthtrust.co.nz; or dropping it off in person to *Level 2, 7 Shotover Street, Queenstown* (between 9:30am – 6pm, Monday – Friday) or *66 Stanley Street, Queenstown* (3pm – 6pm, Monday – Friday) or via post to *PO Box 1948, Queenstown, 9300, NZ*

This application must be submitted before 5pm Friday 24th March, 2017. We will not be accepting applications after this time. Applications will be reviewed by the board of trustees of Wakatipu Youth Trust and the two (2) selected participants will be notified by either phone call or email on Wednesday 31st March 2017.

Participant Criteria for the International Cultural Experience Program

Please tick each box that is relevant to you. If all boxes have been ticked then please proceed with the application. If you are unsure or do not tick all boxes below please contact Wakatipu Youth Trust on (03) 442 8115 or info@wakatipuyouthtrust.co.nz to see if you are eligible to complete and submit the application.

- You (the applicant) are a male aged 13 – 16 years old (prior to August 15th 2017)
- You (the applicant) reside in the Wakatipu region
- You (the applicant) are available to travel between the dates of Friday July 21st, 2017 – Sunday August 13th, 2017
- You (the participant) agree to provide NZD\$1,500 towards the cost of attending Wakatipu Youth Trusts, International Cultural Experience Program, if you are the selected participant; NZD\$500 of this is a non-refundable deposit to be paid before 5pm Friday April 28th, 2017. The remaining NZD\$1,000 can be provided as either a bulk sum, by instalments, or fundraised prior to 5pm Tuesday 27th June, 2017
- You (the participant) understand that Wakatipu Youth Trust and Camp Carolina are covering the remaining estimated cost of NZD\$8,000, which means no other financial assistance, can be made towards, passports, medical insurance, equipment etc.
- You (the applicant) must NOT have a criminal record (*if you are unsure if you have an offence that is recorded please notify us as it may not affect your application*)
- You (the applicant) MUST have a current passport that will not expire within 6 months after August 2017
- You (the applicant) are confident and responsible to travel without an adult on a long distance journey via numerous aircraft
- You (the applicant) agree to abide by the selected airlines rules and regulations when travelling, as you will not be classed as a “minor” but an adult
- You (the applicant) are confident to fill in any paperwork provided by the airlines prior to departure from New Zealand and on arrival to the USA, and on your return
- You (the applicant) agree to not be in possession of any weapons, illegal contraband, or substances whilst you are in transit from Queenstown to USA (and on return) and also whilst you are attending Camp Carolina
- You (the applicant) agree to be an ambassador for the ICEP programme, if selected, to participate, in any fundraisers, talks, functions etc. prior to your departure or when you return, to help ensure the longevity of the program in the future
- You (the participant) understand that any behaviour that is against Wakatipu Youth Trusts values as well as Camp Carolina values can be subjected to cancellation of your participation in the program, either prior or during, and no refund will be provided

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- You (the participant) agree that you will be responsible for any extra costs that will occur if you are removed from the program and that Wakatipu Youth Trust will not be responsible in providing any financial support for any of these extra costs
- You (the participant) understand that the non-refundable deposit (\$500) or money you provided to Wakatipu Youth Trusts International Cultural Experience Program will not be refunded if you choose to cancel or are removed from the program from the above agreement, if you are selected
- You (the participant) will purchase FULL Medical Travel Insurance and will provide a copy to Wakatipu Youth Trust prior to your departure date, if selected
- You (the participant) agree to get a medical check-up from your doctor, if selected, as per Camp Carolina conditions prior to attending camp
- You (the participant) agree to fill in any relevant forms Wakatipu Youth Trust and Camp Carolina provide at any stage that are relevant to the International Cultural Experience Program, you are able to enquire as to the reasons for these forms at any stage if you feel they have no relevance
- You (the participant) agree that any photos/videos taken, in regards to the program, before, during and/or after can be used by Wakatipu Youth Trust and Camp Carolina for promotional use, including; social media (Facebook), newspapers, radio, and on our websites (wakatipuyouthtrust.co.nz and campcarolina.com)
- You (the participant) agree that if you are the lucky participant that you will use this opportunity to have the best time of your life and use every day at Camp Carolina as a chance to try something new!

I, _____ have read and understood the **Selection Criteria** above and, to the best of my knowledge, I am suitable as a candidate for **Wakatipu Youth Trusts International Cultural Experience Program for 2017**. I give permission for this application to be viewed by employees of **Wakatipu Youth Trust** and trustees of **Wakatipu Youth Trust** to determine my eligibility for this program. If selected as the participant of the **International Cultural Experience Program** I agree to attend this program during the period of Friday July 21st, 2017 – Sunday August 13th, 2017. I agree that I will give at least four (4) weeks' notice to **Wakatipu Youth Trust** before the date of Friday 21st July, 2017 if I chose to withdraw my spot as a participant. I affirm that all of this application, including the **Selection Criteria**, is my own work and the information contained herein is true and accurate to the best of my knowledge and belief.

Signature: _____ Date: __ / __ / ____

Participants Details

Surname: _____ First name: _____

Middle name/s (if any) _____

Permanent Address

(Number) (Street) (Town) (Postal Code)

Postal Address (if different from above) _____

Date of Birth ____ / ____ / ____

What will be your age between Friday July 21st, 2017 – Sunday August 13th, 2017?
_____ Years old

Home Telephone Number (__) _____ Mobile Number (__) _____

Email Address

Please check one:

- I am a New Zealand Citizen
- I am a New Zealand Resident with a passport from another country (or dual passport)
- I am a temporary visitor to New Zealand

Passport Details:

Country of Issue _____

Passport Number _____

Passport Issue Date ____ / ____ / ____ Passport Expiry Date ____ / ____ / ____

Have you ever been denied entry to a country before? Yes / No

If yes, please specify where and what were the reasons

Criminal Record (Please answer truthfully as it may not affect your application, it would purely be for understanding if there would be any issues entering USA)

Have you ever been convicted of a crime? Yes / No

If Yes, please specify when and what for

Past Travel

Have you travelled to any other country outside of New Zealand before? Yes / No

If Yes, please specify where and when (*estimation of dates is fine*)

Did you ever travel alone (internationally) during any of these periods during transit?

Yes / No

If you have or haven't travelled alone, please let us know the following:

Would you be comfortable travelling alone internationally?

- Very comfortable*
- A bit nervous*
- I would hate it*

By travelling alone, would you be confident if there was a change in flight times/delays/change of gate when you are at the airport?

- I wouldn't panic, it's easy to sort out what has changed*
- It would be a bit nerve racking but I'll be alright*
- I never want that to happen when I travel*

When travelling internationally alone, how scared would you be to fly?

- I love planes, it's cool*
- Once we take off I would be fine*
- I really prefer not to fly*

Medical Information

Do you have any Special Needs / Medical Conditions / Medication / Allergies?

Yes / No (*this will have absolutely NO impact on the selection process at all*)

If yes, please specify

Doctors Name: _____

Doctors Surgery _____

Contact Phone Number _____

Email _____

Opening Hours (*due to time difference, in case of an emergency*) _____

Will you be purchasing Medical Travel Insurance from a registered provider? Yes / No

If yes, who are you purchasing this from

If no, please specify why (*you will not be eligible if you choose to not purchase Medical Insurance*)

Will you need assistance finding the appropriate provider of Medical Travel Insurance?

Yes / No

If yes, we will assist you if selected

Parent / Guardian Details

Surname _____ First name _____

Relationship to child _____

Contact Number _____

Contact Email _____

1st Emergency Contact Name *(not including yourself)*

1st Emergency Contact Number _____

Relationship to child _____

2nd Emergency Contact Name *(not including yourself or the 1st Emergency Contact)*

2nd Emergency Contact Number _____

Relationship to child _____

Do you have any relatives or friends that reside in USA and may be useful for accommodation or points of contact? Yes / No

If yes, what is their relation to you, how long have you known them, would they be able to provide accommodation if needed?

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Parent / Guardian Checklist

Please tick each box to show you understand. If all boxes have been ticked then please proceed with the application. If you are unsure or do not tick all boxes below please contact Wakatipu Youth Trust on (03) 442 8115 or info@wakatipuyouthtrust.co.nz to help clarify any questions you may have.

- You (the parent/guardian) understand that if your child is selected as a participant of Wakatipu Youth Trusts International Cultural Experience Program then they have committed to attending Camp Carolina, USA between the dates of Friday July 21st, 2017 – Sunday August 13th, 2017
- You (the parent/guardian) understand that your child will be travelling without an adult present from Queenstown, NZ to North Carolina, USA and on return.
(Wakatipu Youth Trust believes that this needn't be a barrier to your child, as attending is an opportunity for them to develop life skills and self-management)
- You (the parent and guardian) understand Wakatipu Youth Trust ensure safety is paramount and will ensure there is a contact point for your child in Auckland, NZ, San Francisco, USA and Asheville, USA (designated transit ports) should there be any problem encountered
- You (the parent/guardian) agree that you are able to provide NZD\$1,500 towards the cost of Wakatipu Youth Trusts International Cultural Experience Program if your child is the selected participant; NZD\$500 of this is a non-refundable deposit to be paid before 5pm Friday April 28th, 2017. The remaining NZD\$1,000 can be provided either as a bulk sum, by instalments, or fundraised prior to 5pm Tuesday 27th June, 2017
- You (the parent/guardian) understand that Wakatipu Youth Trust and Camp Carolina are covering the remaining estimated cost of NZD\$8,000, which means no other financial assistance, can be made towards, passports, medical insurance, equipment, extra baggage etc.
- You (the parent/guardian) understand that if your child does not abide by Wakatipu Youth Trust, Camp Carolina and the selected Airlines policies then he will be removed from the program, thus forfeiting any return of the deposit (\$500) and money provided to Wakatipu Youth Trust for the International Cultural Experience Program prior to the removal of the program
- You (the parent/guardian) understand you will be responsible for any extra costs for flights etc. should your child be removed from the program
- You (the parent/guardian) understand if Wakatipu Youth Trust cancel the program, which isn't the result of your child being removed, then you will be provided a full reimbursement of any money you provided (including the non-refundable deposit)

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- You (the parent/guardian) understand that you may incur additional costs, such as passport, medical check-up, medical insurance, extra baggage etc. at your own expense
- You (the parent/guardian) understand Wakatipu Youth Trust sets out to ensure any child can have the opportunity to attend this and all other programs, no matter what economic situation you are in and if you feel assistance is needed to gain financial support than you can contact us at any stage for private and confidential advice
- You (the parent or guardian) understand that you will not be able to contact your child whilst they attend Camp Carolina (as it is a standard policy all parents that send their child to Camp Carolina agree upon) You will be provided updates from Camp Carolina through daily photos on their website and letters (emailed to you) from your child once (1) a week. You WILL be able to contact Wakatipu Youth Trust worker Rhys Smith, at any stage, who will be working at Camp Carolina

I, _____ (*parent/guardian*) of the applicant have read and understood the terms and conditions to *Wakatipu Youth Trusts International Cultural Experience Program* for 2017. If my child is selected as the participant of the *International Cultural Experience Program* I agree to work with *Wakatipu Youth Trust* and ensure that we meet all requirements before the dates provided in the *Parent/Guardian Checklist and Selection Criteria*. I agree that I will give at least four (4) weeks' notice to *Wakatipu Youth Trust* before the date of Friday 21st July, 2017 if I chose to relinquish my child's spot as a participant.

I affirm that all of this application, including the *Parent/Guardian Checklist*, is my own work and the information contained herein is true and accurate to the best of my knowledge and belief.

Signature _____ Date: ____ / ____ / _____

