



Camp d'Amitié 2010

Volunteer Application
Mon P'tit Village, Dampus
Léogâne, Haiti
NY : 347-410-3724
Haiti: 011-509-3678-9256



1. Last name _____ First name _____

2. Address _____ Phone# _____ Email _____

3. Sex _____ 4. Age _____ 5. Marital status _____

6. Contact Person. Last Name in US: Last name _____ First name _____

7. Address _____ Phone # _____ Email _____

8. Education level _____ 9. Hobbies _____

10. Tell us about yourself in a paragraph

Interests/Skills/Abilities _____

11. Why are you interested in participating in Camp d'Amitié 2010?

12. Do you have any health restrictions? Yes _____ No _____

If yes specify _____

13. Are you allergic to any kind of food? Yes _____ No _____

If yes specify _____

Have you ever traveled to a tropical country? Yes _____ No _____

Where and when? _____ How long did you stay? _____

References – Name and addresses/Telephones #s of 2 persons we can contact about you.

Name	Address	Phone #
1.		
2.		

I certify that all information provided above is true and complete to the best of my knowledge. I authorize the Camp d'Amitié to verify the information stated in this application.

Signature _____

Date _____

Applications must be received by June 28, 2010 and cancellations must be made 5 days prior to the departure date to guarantee a full refund.