



Construyendo Esperanza Panamá

Application

Form 1

Please fill out this form completely. Do not forget to write down the specific outreach dates for which you are applying. Use one application per outreach. (Make copies if necessary.)

Group Name: _____

Group Leader's Name: _____

Denomination: _____

City: _____ State/Province: _____ Zip: _____

Emergency Phone Number: _____

(For use while group is on outreach)

Emergency Contact Person: _____

What is the expected size of your group? _____

If your group size increases or decreases in sizes, you must clear any changes in advance through our office.

Does your group have its own English/Spanish translator(s)?

() Yes () No If Yes, how many? _____

Please specify your group's outreach dates below, beginning with the day your group arrives, and ending with the day you leave Panama.

Date of Arrival: _____

Date of Departure: _____



GROUP LIST

Form 2

Church Name: _____ Group Leader: _____

Outreach Dates: _____

Please list the names of all the participants, their age and gender. (Please Print)

1) Name: _____ () M () F Age: _____

2) Name: _____ () M () F Age: _____

3) Name: _____ () M () F Age: _____

4) Name: _____ () M () F Age: _____

5) Name: _____ () M () F Age: _____

6) Name: _____ () M () F Age: _____

7) Name: _____ () M () F Age: _____

8) Name: _____ () M () F Age: _____

9) Name: _____ () M () F Age: _____

10) Name: _____ () M () F Age: _____

11) Name: _____ () M () F Age: _____

12) Name: _____ () M () F Age: _____

13) Name: _____ () M () F Age: _____

14) Name: _____ () M () F Age: _____

15) Name: _____ () M () F Age: _____

16) Name: _____ () M () F Age: _____

17) Name: _____ () M () F Age: _____



GROUP ARRIVAL INFORMATION

Form 3

Contact Information

Group Name: _____

Group Leader's Name _____

Number of People: _____ Outreach Dates: _____

Emergency Contact Person: _____

Emergency Phone Number: _____

Arrival Information:

Please send complete flight information.

Date of Arrival: _____ Arrival Time: _____

Name of Airline: _____ Flight Number: _____

Departure Information

Please send complete flight information.

Date of Departure: _____ Time of Departure: _____

Name of Airline: _____ Flight Number: _____



Authorization Form (Minor)

Form 4

(Minor- Under Age 18)

General Information

Last Name: _____ First: _____

Address: _____ City: _____ State: _____ Zip _____

Day Phone: _____ Evening Phone: _____

Emergency Phone: _____ Dates of Outreach: _____

Email Address: _____

Waiver and Release of Liability

In consideration of Youth With a Mission Panama, (YWAM) organizing, arranging and permitting me to attend and participate in the event, I hereby waive all rights which I may have now or which may accrue in the future against YWAM, its respective chapters, directors, officers, employees, and members (collectively the "YWAM Representatives"), and I hereby release and discharge YWAM and the YWAM Representatives from, and agree to indemnify and hold actions, damages, causes of action, suits, costs, losses, expenses, claims, demands, damages, and judgments (collectively called "Losses and Claims"), which I, my spouse, family members, children, invitees, heirs, executors, administrators, successors assignees ever had, now have or hereafter can, shall or may have resulting from or arising in connection with my travel to, attendance at or participation in YWAM events. I acknowledge that certain legal rights against YWAM or the YWAM Representatives may available to me now or in the future as a result of Losses or Claims, and that executing this waiver and release of liability, my spouse and ever relinquishing those rights against YWAM and the YWAM Representatives. I acknowledge that no promises, representations, or affirmation of fact were made to me by YWAM or the YWAM Representatives concerning to safety of the event, the security precautions taken in sponsoring the event, the relative safety or danger associated with traveling to the event or participating in any activity, academy, event or outing related to, associated with or connected in any way to the event and affirm that I have read and understand the forgoing provisions of this waiver and release of liability and accept the terms of this waiver and release of liability as a condition to my attendance at the event.

Authorization and Consent for Treatment

I give permission for my son/daughter to attend the above YWAM function. In addition, I give permission for my son/daughter to travel to Panama. I have read the above waiver, release of liability, and agree to its provisions. In addition, I give permission for my son/daughter to receive any medical treatment deemed necessary by a physician.

Signature: _____ Date: _____

Relationship to Minor: _____



Authorization Form (Adult)

Form 5

(Adult-Over Age 18)

General Information

Last Name: _____ First: _____

Address: _____ City: _____ State: _____ Zip _____

Day Phone: _____ Evening Phone: _____

Emergency Phone: _____ Dates of Outreach: _____

Email Address: _____

Waiver and Release of Liability

In consideration of Youth With a Mission Panama, (YWAM) organizing, arranging and permitting me to attend and participate in the event, I hereby waive all rights which I may have now or which may accrue in the future against YWAM, its respective chapters, directors, officers, employees, and members (collectively the "YWAM Representatives"), and I hereby release and discharge YWAM and the YWAM Representatives from, and agree to indemnify and hold actions, damages, causes of action, suits, costs, losses, expenses, claims, demands, damages, and judgments (collectively called "Losses and Claims"), which I, my spouse, family members, children, invitees, heirs, executors, administrators, successors assignees ever had, now have or hereafter can, shall or may have resulting from or arising in connection with my travel to, attendance at or participation in YWAM events. I acknowledge that certain legal rights against YWAM or the YWAM Representatives may available to me now or in the future as a result of Losses or Claims, and that executing this waiver and release of liability, my spouse and ever relinquishing those rights against YWAM and the YWAM Representatives. I acknowledge that no promises, representations, or affirmation of fact were made to me by YWAM or the YWAM Representatives concerning to safety of the event, the security precautions taken in sponsoring the event, the relative safety or danger associated with traveling to the event or participating in any activity, academy, event or outing related to, associated with or connected in any way to the event and affirm that I have read and understand the forgoing provisions of this waiver and release of liability and accept the terms of this waiver and release of liability as a condition to my attendance at the event.

Acceptance of Release of Liability

I have read the above waiver and release of liability and agree to its provisions.

Signature: _____ Date: _____

