

Christian Peacemaker Teams

P.O. Box 6508; Chicago, IL 60680; Tel: 773-376-0550; Fax: 773-376-0549; e-mail: delegations@cpt.org

Application for Short Term Delegation

1. Please fill out the information below to help us plan for how you can most effectively participate in an upcoming CPT delegation. You will note particular emphasis on the role of support persons for this peacemaking mission.
2. PLEASE ATTACH A LETTER or ESSAY giving us some idea of your experience or training in cross cultural work, nonviolent direct action, undoing racism, mediation, or other peacemaking activity. Include thoughts on how you plan to make use of this delegation experience in your congregation/meeting, community or region.
3. Sign the *Statement of Personal Responsibility* on page 2 of this form.
4. Please attach a brief resume of your education and work experience if available.
5. CPT has limited funds available to facilitate participation in our delegations by individuals who otherwise couldn't afford to participate. Request an application from delegations coordinator or download from website

Name: _____ Address: _____
(as it appears on your passport)
City: _____ State/Prov: _____ Zip: _____ Country: _____
Tel:(h) _____ (w) _____ (other/Skype) _____
e-mail: _____ Date of Birth: ___/___/___ Passport#: _____
place of issue _____ date of issue _____ expiration date _____ Citizenship: _____
Health Ins. Co.: _____ Policy # _____ Tel: _____
What city will you fly out of: _____ Frequent Flyer info.: _____

Please indicate any medical or mental health concerns, dietary restrictions or if vegetarian, and list any medications you regularly take. _____

Your blood type _____ Gender identity _____ . Are you currently on CPT's mailing list? Yes _____ No _____ .

EMERGENCY CONTACT: Please fill in to assist in case of emergency. PLEASE GIVE A COPY OF YOUR SIGNED STATEMENT OF PERSONAL RESPONSIBILITY (see over) TO THE PERSON LISTED HERE.

Name: _____ Address: _____
City: _____ State/Prov: _____ Zip: _____ Country: _____
Tel:(h) _____ (w) _____ (cell) _____
e-mail: _____ Relationship: _____

CONGREGATIONAL CONTACT: (Please include name of person and name of church, meeting, or other)

Name _____ Address: _____
City: _____ State/Prov: _____ Zip: _____ Country: _____
Tel:(h) _____ (w) _____ (cell) _____
e-mail: _____ Role: _____

MEDIA SUPPORT PERSON: to distribute information to key contacts or press people in both church and secular media during the delegation, and to assist in setting up speaking engagements or media interviews upon your return.

Name: _____ Address: _____
City: _____ State/Prov: _____ Zip: _____ Country: _____
Tel:(h) _____ (w) _____ (cell) _____ e-mail: _____

1. Please check all that apply: I have experience, skills, or training in ___group facilitation, ___leading worship, ___writing articles or press releases, ___translation, , ___nonviolent action, ___visual arts/street theater, ___decisionmaking in emergency, ___fundraising, ___photography. On this trip I plan to make/write ___photos, ___audio, ___video, ___articles. ___Yes, they can be shared. I will also bring ___messages or letters of friendship*, ___banners*, ___prayers, ___other _____ (*check with delegation leader first)

2. Answering this item is optional: CPT seeks to include participants of diverse backgrounds on its delegations. How would you describe yourself? ___ African descent, ___ Asian descent, ___ European descent, ___ Latin American descent/Hispanic ___Aboriginal/ Native American, ___ Multi-racial, ___ Other _____ .

3. How did you hear about CPT delegations: ___ friend, ___ church, ___ publication, ___ other _____ ; name _____

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STATEMENT OF PERSONAL RESPONSIBILITY

I (print name) _____ have voluntarily joined the Christian Peacemaker Team traveling to (place) _____ from (dates) _____.

I am aware that I am entering a situation that may be tense at the present time and that there may be danger of war or other violent conflict occurring while I am there. I understand that this is a project of nonviolent peacemaking.

I understand that I could be imprisoned, taken hostage, injured or even killed. I understand that in cases of hostage-taking or kidnapping it is CPT's policy not to pay ransom and to reject military or violent approaches to resolving the matter. I also understand that access to health care facilities, adequate shelter and food may be difficult on occasion.

I assume and accept full responsibility for any risks of personal injury, illness, damage, imprisonment or other deprivation that may occur as a result of my participation in this program including, but not limited to, the risks described above.

I understand that Christian Peacemaker Teams and its supporting denominations (Church of the Brethren, Friends United Meeting, Mennonite Church Canada, Mennonite Church USA or any other supporting denomination or group), employees, or volunteers cannot ensure my safety or well being while on this trip.

I also hereby release and agree to hold harmless the Christian Peacemaker Teams and its supporting denominations, members, employees, directors, agents and successors from any and all liability or claims, demands rights, causes of action, whether known or unknown, brought by me or on my behalf or by my heirs, beneficiaries, executors, or assigns.

I am at least eighteen (18) years old and have read and understood the above statements.

Signed this _____ day of _____ (month), 20_____

(your signature) _____

(witness #1 signature) _____

(witness #1 print name) _____

(witness #2 signature) _____

(witness #2 print name) _____