Japan International Youth Event 2019

Attached

**Application Form**

Please type or write in BLOCK letters and email this form to program@girlscout.or.jp by 3 December 2018. Your application must be completed in full and approved by your Association to be considered.

**ABOUT YOU**

|  |  |
| --- | --- |
| **FIRST NAME**  |  |
| **FAMILY NAME** |  |
| **MIDDLE NAME** |  |
| **COUNTRY** |  |
| **NATIONALITY** |  |
| **MEMBER ORGANISATION** |  |
| **POSITION** |  |
| **DOB (D/M/Y)** |  |
| **GENDER** |  |
| **MAILING ADDRESS** |  |
| **HOUSE PHONE ( include country code )** |  |
| **CELL PHONE (include country code)** |  |
| **E-MAIL ADDRESS** |  |
| **PASSPORT NUMBER** |  |
| **PASSPORT DATE OF ISSUE** |  |
| **PASSPORT PLACE OF ISSUE** |  |
| **PASSPORT DATE OF EXPIRY** |  |
| **VISA TO ENTER JAPAN** | * **I NEED □　I do NOT need**
 |
| **DIETARY REQUIREMENT** |  |
| **ACCESS REQUIREMENT** | * **I NEED □　I do NOT need**
 |
| **ENGLISH SKILL** | **□Native □Fluent □Intermediate****□Basic □None** |

|  |
| --- |
| **The reason to apply this event** |
| **What does LEADERSHIP mean for you** |

**EMERGENCY CONTACT DETAIL**

|  |  |
| --- | --- |
| **EMERGENCY CONTACT NAME** |  |
| **RELATIONSHIP TO YOU** |  |
| **MAILING ADDRESS** |  |
| **HOUSE PHONE ( include country code )** |  |
| **CELL PHONE (include country code)** |  |
| **E-MAIL ADDRESS** |  |

**ENDORSEMENT**

|  |  |
| --- | --- |
| **SIGNATURE OF CHIEF COMMISSIONER / INTERNATIONAL COMMISSIONER** |  |
| **MEMBER ORGANISATION** |  |
| **NAME OF CHIEF COMMISSIONER / INTERNATIONAL COMMISSIONER** |  |
| **E-MAIL ADDRESS** |  |
| **DATE** |  |