



Concerned **Diaspora**
around the world and always close



Haiti Mission Trip Carrefour, Haiti

August 21 – 27, 2010

Registration Forms & Checklist



REGISTRATION INSTRUCTIONS

1. **Complete registration form immediately** and send via fax to 908-934-9333

Our offices will review your registration form and contact you via email with a confirmation of your participation in this trip.

Once your participation is confirmed, purchase your airfare immediately (refer to the 'Trip Information – General' page)

2. Mail payment for trip cost along with completed and signed forms (see list below). Our offices must receive payment and forms by mail, no later than **August 1, 2010** to finalize your registration.

- Mail payment of \$550 (via check or money order)
- Completed Permissions and Liability Release
- Completed Code of Conduct Form
- Completed Emergency Medical Information Form
- Color copy of your passport
- Copy of airline ticket receipt

3. A final confirmation will be sent via email about your completed registration.

Return original forms to:

J. Frantz Dorilas
Concerned Diaspora
320 Park Avenue
Plainfield, NJ 07060

We encourage you to contact anyone on our team with your questions.

Our Team:

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REGISTRATION FORM

Haiti Mission Trip

Trip Destination: _____ Trip Dates: _____

1. Name _____
Last First (legal) Preferred Name Middle

2. Permanent Address _____
Street, Box or R.R. City State Zip

3. Telephone: Home _____ Business _____ Cell _____ Fax _____

E-mail _____

4. Age _____ Birth Date _____ Birth Place _____

5. US Citizen: Yes _____ No _____ If "No", state your Nationality: _____

6. Is there anything that prohibits you from travelling to Haiti? _____ If yes, explain: _____

7. Gender _____ Marital Status: _____ T-Shirt Size: S M L XL XXL (circle one)

8. Occupation _____ Industry _____
Title _____
Description _____

9. Have you had previous experience in the mission field or traveled in a foreign country? _____ If yes, please explain: _____

10. Emergency contacts in the U.S.

NAME: _____ NAME: _____

Phone Numbers: _____ Phone Numbers: _____

11. What foreign language do you speak? _____

12. List any medical or first aid training: _____

13. What talents do you have that you feel the Lord can use? What specific things are you good at doing?

14. You will need a Passport. Do you have one? _____ Passport Number _____ Expiration Date _____

If you already have a passport, please send a copy of the front page of your passport (photo and passport number).
IF YOU DO NOT HAVE A PASSPORT, apply for one IMMEDIATELY. Please send a copy of your passport ASAP.

15. Do you have any physical limitations such as carrying luggage or walking long distances? _____

Explain: _____

To expedite your registration, please fax this form to 908-934-9333

Return the original version by mail to:

J. Frantz Dorilas
Concerned Diaspora
320 Park Avenue
Plainfield, NJ 07060



PERMISSIONS AND LIABILITY RELEASE

Haiti Mission Trip

Destination: _____

Dates: _____

I understand that the Haiti mission trip for which this Permissions and Liability Release Form is being given is described as follows:

A mission trip is being coordinated by the non-profit organizations, **Concerned Diaspora and NJ For Haiti**, for adults to travel to _____, Haiti, on _____. This mission trip may include work at tent cities, orphanages, schools, churches, and neighboring areas, as well as places of Christian worship and fellowship.

I hereby consent to my participation is voluntary in the above-described event. I further agree and accept that my participation in this event presents varying degrees of risks - including, but not limited to, health hazards from food, water, diseases, pests, and poor sanitation, personal injury, death, crime, political instability, government opposition, and inadequate medical facilities (herein "Risks") - which may arise from a condition of the premises at which the various event activities are held and/or the areas we will pass through on our travels; from an action of any person in connection with the conduct of any planned or unplanned activity; or from other unforeseen elements. I acknowledge that such known and unknown risks exist, I understand that I may incur personal injury or property damage while participating in this event, and I fully and willingly agree to assume all risks associated with this event.

I consent to first aid and emergency medical care for myself by any mission team member (and/or any other adult appointed or designated by him/her) and authorize, if necessary, admission to a hospital or health care or diagnostic facility, and/ or medical evacuation, for treatment of injuries that are sustained while participating in this event.

I give permission for any mission team member (and/or any other adult appointed or designated by him/her) to provide transportation or arrange for transportation, if needed, for medical care.

I understand that I am responsible for any and all medical expenses that I may incur, including medical transport, as a result of any accident or illness while participating in this event. I understand that I have a duty to provide, and that I am covered, by primary accident and medical insurance.

I release and forever discharge **Concerned Diaspora and NJ For Haiti**, their agents and volunteer servants, successors and assigns, directors, trustees, officers, employees, and other representatives from any and all liability for any and all injury, death, loss, or damage which may be incurred due to my participation in the Activities, whether or not caused by the **Concerned Diaspora and NJ For Haiti**, through their negligence or otherwise, that I may occur as a result of my participation in, attendance at, and travel to and from the event.

Furthermore, I do hereby expressly stipulate, and agree to indemnify and hold forever harmless **Concerned Diaspora and NJ For Haiti**, their agents and volunteer servants, successors and assigns, directors, trustees, officers, employees, and other representatives against loss from any and all present or future claims, demands, or actions in law or in equity that may hereafter be made or brought by me, by anyone on my behalf, or by anyone else on their behalf for damages or any other legal or equitable remedy on account of any injury, illness, physical condition, inconvenience or loss sustained by me/my child during the event or travel to and from the same.

I, _____, hereby acknowledge that I have read the foregoing, understand its content, and have signed the same as my own free act and deed.

Participant: (please print): _____

Participant Signature

Date

Witness



Code of Conduct Haiti Mission Trip

Destination: _____

Dates: _____

I accept the Code of Conduct guidelines listed below for participating in this trip. I go not as a tourist, but as a guest of another country. I understand that Haiti is not considered a Developed Country and does not have the same conveniences I may be accustomed to at home.

I recognize and accept the following conditions which will further the usefulness and safety of our short-term mission. If accepted as a member of this **Concerned Diaspora and NJ For Haiti** team, I agree to:

1. Adopt an attitude that I am on this team to try to understand the host culture, not to convince them of my own viewpoint or style. I understand that there are many different ways to accomplish the same objective and know that my way is not necessarily the best.
2. Abstain from making derogatory comments to team members or about our host country regarding people, politics, sports, religion, race, or traditions.
3. Accept and submit to the leadership role and authority of the trip director and promise to abide by his or her decisions as they concern this mission trip.
4. Understand that our team's work is but a tiny speck on the bigger picture that our mission partners are trying to accomplish. I promise not to be overly demanding, to do my best not to offend or cause embarrassment for the local mission host and to help them attain their long-term goals.
5. Attend all team meetings possible, both prior to departure (if any are scheduled) and during the mission trip.
6. Expediently follow up on all requirements for passports, visas, financial obligations, vaccinations, travel insurance, etc.
7. Refrain from meddling, complaining, and obscene or insensitive humor or behavior.
8. I understand that I must travel with the rest of the team, unless other prior arrangements are made and the trip director has been notified in advance of the trip.
9. If a loved one or dear friend is traveling with me, we agree to interact with all members of the team, not just one another.
10. Avoid any actions that might be perceived as amorous attentions toward any people I meet while on the mission trip.
11. Refrain from using tobacco or alcoholic beverages while in the host country. Abstain from any illegal drugs or prohibited activity while on this trip.
12. Refrain from giving gifts, such as money, clothes, jewelry, CD players, etc. to the locals. Although the intent of the giver is good, the result after we leave causes problems for our host, and jealousy and bitterness among those locals who received no such gifts. If I feel compelled to give a gift to someone I have met, I will consult first with the trip director before I promise or give the gift, and I promise to let him or her make the final decision on this matter.

- 13. I will respect the advice I am given concerning attire, eating and drinking, and other such traditions that will help me to assimilate into the local community.
- 14. I agree that in the event my conduct is considered so unsatisfactory that it jeopardizes the success of the trip, and that mediation during the trip has failed to correct my behavior, that my services in connection with this mission shall end and I shall return home immediately at my own expense.
- 15. In signing below, I represent that I am 18 years of age or older, or my parent/guardian will sign also, accepting the above conditions on my behalf.

Participant: (please print): _____

Participant Signature

Date

Witness



EMERGENCY MEDICAL INFORMATION FORM Haiti Mission Trip

Please complete so that health care providers can be aware of your personal health needs. This form must be completed and carried by all event participants.

Name of participant: _____

Does the participant have: (if "yes", explain)

Yes No ALLERGIES: _____

Yes No HEART CONDITION: _____

Yes No ASTHMA: _____

Yes No OTHER: _____

Is the participant subject to: (if "yes", explain)

Yes No HEADACHES: _____

Yes No SEIZURES: _____

Yes No MOTION SICKNESS: _____

Yes No FAINTING: _____

Yes No SLEEP WALKING: _____

Yes No UPSET STOMACH: _____

Yes No OTHER: _____

Does the participant have a reaction to: (if "yes", explain)

Yes No BEE STINGS: _____

Yes No PENICILLIN: _____

Yes No OTHER DRUGS: _____

Yes No POISON IVY, OAK, SUMAC: _____

Yes No OTHER: _____

Yes No Has the participant had any serious illness or surgery within the past 10 years? Please list:

Yes No Does the participant have any condition that would prevent him/her from participating in any activities? Please list: _____

Yes No Does the participant take any prescription medication? Please list, including dose and times: _____

Yes No Are any drugs ineffective in treatment? _____

Yes No Is the participant diabetic? Medication? _____

Yes No Is the participant able to function outdoors, in hot and humid weather, for an extended period of time? If not, explain: _____



Preparations for Haiti Mission Trip

1. **Pray!** Pray for the people of Haiti, pray that you can be an instrument of God, pray for peace in your heart, pray for God's watchful and faithful hand over your group, pray for safe travels, pray for a productive mission trip, and trust in God with all your heart and place yourself in his hands!
2. **Get a passport.** Applications are at the Post Office. You will need to have 2 copies of a picture of yourself taken. The passport process can take 6-8 weeks. To apply or renew your passport, go to http://travel.state.gov/passport/passport_1738.html. Costs vary.
3. **Immunizations are necessary.**
 - Visit the Center for Disease Control's website to find out the latest on immunizations necessary prior to going to Haiti: <http://wwwnc.cdc.gov/travel/content/news-announcements/relief-workers-haiti.aspx>
 - Check with your health care provider regarding whether you have had any of these immunizations already and if not, what is covered by your insurance. If your provider does not cover these immunizations, you can contact your county Health Department. Costs will vary.
 - The recommended shot/vaccines as of June 2010 are as follows (however the CDC or your health professional may recommend differently).
 - Typhoid – shot is good for 2 years, oral vaccine is good for 5 years
 - Hepatitis A series
 - Hepatitis B series
 - Rabies
 - Meningitis
 - Diphtheria/Pertussis/Tetanus(DPT)
 - Dengue
 - Flu
 - Malaria preventative (series of weekly pills)



Important Items to Bring

- Bible
- Notebook for journaling
- Flashlight, batteries (electricity goes out)
- Money Belt
- Lock for your suitcase
- Personal medications, including malaria pills and motion sickness meds
- Bug repellent with Deet
- Water bottles / Bottled Water (2 or 3 bottles for 1st day of travel – purchase at airport before boarding plane to Haiti)
- Sunglasses
- Sun Block (STRONG, not less than 30 SPF)
- Hat (for the sun)
- Camera w/ extra batteries
- First aid kit
- Bandanas (very handy)
- Antibacterial hand lotion
- Wind up or battery powered alarm clock
- Baby powder (for the heat)
- Plastic hangers (to hang your clothes at the guest house)
- Comfortable walking shoes
- Flip flops for the shower, guest house
- Roll of toilet paper
- Backpack to carry items around (water, supplies, etc.)
- Earplugs - if barking dogs and crowing roosters bother you while sleeping
- Snacks
- Wet Ones (wipes)
- Towels
- Wash Cloths
- Sheets
- Personal Toiletries (soap, toothpaste, tooth brush, feminine napkins, deodorant, etc)



Sample Trip Itinerary

<i>Start Time</i>	<i>End Time</i>	<i>Team Activity</i>
Day 1 Travel Day - Welcome to Haiti!		
7:00am	2:00pm	Volunteers arrive at Toussaint L'Ouverture International Airport in Port-au-Prince, Haiti and are welcomed by the field coordinator for the trip. Transportation will be provided from the Airport to the mission trip housing location.
3:00pm	4:00pm	Arrive at mission trip housing. Volunteers are given a course on the rules and safety guidelines during their stay and get familiar with the staff at the estate. They will also be given a tour of the estate and be assigned places to sleep. Volunteers leave their possessions in their assigned areas of stay.
4:00pm	5:00pm	The group will be divided into teams based on the experiences and interest indicated on the individual's application. Each team will then meet and be briefed on the organization and particular site on which they will be working. Volunteers will also choose someone in their team that they will be paired with for the entirety of the trip.
5:00pm	6:00pm	The group will then go back to unpack and get settled before dinner
6:00pm	8:00pm	Team Dinner provided at mission trip housing
8:00pm	Until	Free time and prepare for the next day
Day 2 & 3 Medical Clinics – School & Camp Site		
6:00am	8:00am	Wake up and Preparation
8:00am	8:45am	Team Breakfast provided at mission trip housing
9:00am	4:30pm	Volunteers will be taken to their designated work sites. Activities include: Setup clinic, designate areas for physicians, dentist, triage, pharmacy, and patient waiting. At end of day, Breakdown clinic - Pack and inventory supplies. Secure an area where supplies may be left for the next mission or obtain information where they may be donated to a local clinic, hospital or orphanage.
4:30pm	6:00pm	Volunteers are transported back to mission trip housing
6:00pm	8:00pm	Team Dinner provided at mission trip housing
8:00pm	9:00pm	Team debriefings and reviews about the day. The different teams will get to share their experiences
9:00pm	Until	Free time and prepare for the next day
Day 4 Food Distribution - Cooking & Feeding		
6:00am	8:00am	Wake up and Preparation
8:00am	8:45am	Team Breakfast provided at mission trip housing

9:00am	4:30pm	Volunteers will be taken to their designated work sites. Teams will purchase food, cook meals and distribute meals to residents of the tent camps
4:30pm	6:00pm	Volunteers are transported back to mission trip housing
6:00pm	8:00pm	Team Dinner provided at mission trip housing
8:00pm	9:00pm	Team debriefings and reviews about the day. The different teams will get to share their experiences
9:00pm	Until	Free time and prepare for the next day

Day 5 & 6 Building Project

6:00am	8:00am	Wake up and Preparation
8:00am	8:45am	Team Breakfast provided at mission trip housing
9:00am	4:30pm	Volunteers will be taken to their designated work sites
4:30pm	6:00pm	Volunteers are transported back to mission trip housing
6:00pm	8:00pm	Team Dinner provided at mission trip housing
8:00pm	9:00pm	Team debriefings and reviews about the day. The different teams will get to share their experiences
9:00pm	Until	Free time and prepare for the next day (On Day 6 – pack luggage for departure to USA)

Day 7 Travel to USA

6:00am	7:00am	Wake up
7:00am	8:00am	Team Breakfast provided at mission trip housing
9:00am	10:00am	Volunteers make final preparations to depart
10:00am	12:00	Volunteers are transported from the mission trip housing and dropped off at Toussaint Louverture International Airport in Port-au-Prince. The bus will make a brief stop along the way at a Haitian marketplace to allow participants to purchase souvenirs.
12:00pm	Until	Check-in at airport and depart to USA

Note: This is a tentative schedule and is intended to represent an outline of the days and the activities. Exact time intervals are subject to change by the coordinator to ensure the efficiency and safety of trip.