



**AMBASSADOR APPLICATION AND AGREEMENT**

A Friendship Force Journey offers an opportunity for people from different parts of the world to share their lives with each other in the spirit of friendship. The success of the experience depends on the extent to which participants can build friendships, exercise flexibility, adapt to unforeseen difficulties, and promote understanding.

The following information is needed to help Friendship Force International and Journey Coordinators select Ambassadors who are representative of their community or region. In the event the applicant is not able to meet in person with the journey Coordinator, you will be asked to provide references and other supporting documentation. Detailed information also helps us match Ambassadors with host families. Each applicant must complete and sign the Application and Agreement. We appreciate your cooperation.

<b>Ambassador Information</b>				
Last name:		First:	Middle:	Marital Status:
Is this your legal name? Yes    No		If not, what is your legal name (as shown on passport)		Birthdate: (MM/DD/YY)
			Age:	Gender:
Address:				
Home Phone:		Cell phone:		Email:
Nationality:		Passport Number:		Passport Expiration Date:
If traveling with someone else, complete below ( <i>each applicant should submit their own application</i> )				
Name:		Relationship:		Age:
Journey number and/or name you are applying to: Greater Cincinnati to Saitama, Japan – journey number 20064				
Are you applying for the <b>Extension?</b> <b>Yes</b> <b>No</b>				
<b>Ambassador Personal History</b>				
Please note any languages you speak other than your own and your proficiency (Excellent, Good, Fair, Poor)				
I can speak/write:		Proficiency:		I can speak/write:
				Proficiency:
Are you currently working? Yes    No			(b) Occupation (previous if retired):	
Have you participated in a home stay (or similar) before?    Yes:    No				
If yes, were you a: (Host, Visitor, Both)				
Are you currently a member of a Friendship Force Club?    Yes    No				
If yes, which club?				
If no, how did you learn about Friendship Force?				
Please describe your interests and hobbies relative to the destination of this journey:				

Do you smoke? Yes No	Do you mind if your host smokes inside the home? Yes No	Are you comfortable with pets living inside the host's home? Yes No
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**Health and Mobility**

Participation in a Friendship Force home-stay may require a greater level of physical activity than an Ambassador is accustomed to, such as carrying luggage, climbing stairs, riding public transportation, and walking longer distances, among others. (For more specific health and mobility requirements for this journey, please ask the Ambassador Coordinator for the Health and Mobility Checklist from the host club.)

Are you able to carry your own luggage upstairs and/or over long periods of time by yourself? Yes No	If no, please elaborate:
Are you able to climb a flight of stairs several times a day if needed and without assistance? Yes No	If no, please elaborate:
Are you able to walk on uneven paths and up and down small hills and stairs and/or stand for over an hour? Yes No	If no, please elaborate:
Are you able to ride and navigate on public transportation easily, perhaps several times a day? Yes No	If no, please elaborate:
In the past three years, have you had any major health issue that would preclude you from carrying out active elements of a Friendship Force Journey? Yes No	If yes, please elaborate:
How would you describe your own day-to-day activity level at home, on your own?	Please select one: Not very active. Active sometimes. Active every day. Very active
Do you have any particular diet, health, medical or allergy issues that require special consideration? Yes No	If yes, please specify (vegetarian, allergy to penicillin, allergy to animals, high blood pressure, etc.) <i>Ambassadors may be required to provide supporting medical documentation from their doctor to be accepted on this journey.</i>

Please provide two references that your Ambassador Coordinator or Friendship Force International may contact to verify your ability to participate fully in this journey (preferably at least one of these is the last Ambassador or Host Coordinator you traveled with):

1. Reference Name:	Relationship to you:
Phone Number:	Email:
2. Reference Name:	Relationship to you:
Phone Number:	Email:



# **FRIENDSHIP FORCE INTERNATIONAL AMBASSADOR APPLICATION AND AGREEMENT**

Friendship Force International was founded in 1977 with a single mission: to promote global understanding across the barriers that separate people. A nonprofit organization, Friendship Force International is active in more than 50 countries, promoting friendship and goodwill through an extensive program of homestay journeys. In consideration of his/her selection, the person signing this Agreement ("Ambassador") agrees to the following:

1. The Ambassador Fee entitles the Ambassador to participate in a specific journey and covers only the items specified in the itinerary. The schedule of payment of Ambassador Fees must be observed.
  2. The Ambassador recognizes that connected with any travel there are risks of loss, damage, and injury to persons and property, and the Ambassador is willing to assume and bear those risks. The Ambassador also recognizes that he/she is responsible for failure to comply with any law of any country visited. Therefore, the Ambassador, in consideration of his/her selection by Friendship Force International, agrees to and does hereby release, indemnify, and hold harmless Friendship Force International (which shall include the directors, officers, and employees thereof, as well as its volunteer workers) from all claims, actions, and causes of action based upon or by reason of any loss, damage, or injury to the Ambassador's person or property, arising out of or in any manner connected with any aspect of the journey program or by reason of the Ambassador's failure to comply with any law in any country in which he/she may travel in connection with the journey program. Friendship Force International shall have no liability or obligation to return the Ambassador to his/her home community if the Ambassador should miss the return trip due to illness, injury, failure to report to the airport at the prescribed time, or for any other reason.
  3. All Friendship Force Ambassadors are required to secure adequate travel and medical insurance to cover emergencies during the journey. No travel, health, or accident insurance is provided by Friendship Force International, although one may be recommended (see <https://www.friendshipforce.org/trip-insurance/>). This requirement can be fulfilled through the Ambassador's existing insurance policy if it covers international travel, including emergency repatriation, or through a separate travel insurance policy. All travel will be subject to regulations and limitations contained in the ticket(s) issued to the Ambassador.
  4. Any request for cancellation of this agreement must be made in writing to the local Journey Coordinator and forwarded to Friendship Force International. If an Ambassador cancels more than 60 days before departure, FFI will refund all FFI Ambassador Fees and Host Club Program Fees paid. If an Ambassador cancels 60 days or less prior to the departure, FFI will not refund the ambassador fee paid. If FFI cancels an journey, all FFI Ambassador Fees and Host Club Program Fees paid will be returned to Ambassadors.
- If this agreement is not for a club-to-club journey, please consult your FFI Program Coordinator for cancellation and refund policy.
5. Friendship Force International may cancel this agreement if it is unsuccessful in establishing an journey which satisfies the goals of Friendship Force International for any reason, including cancellation of or unacceptable changes to the airline arrangements or failure of the local committee to recruit the required number of Ambassadors. In such cases, the Ambassador Fee will be refunded except the \$25 portion designated as non-refundable.
  6. If Friendship Force International is making travel arrangements for your journey, any price increase for transportation will be passed on to the Ambassador until the time that the full Ambassador Fee is received at the international office of Friendship Force International in Atlanta, Georgia, USA. After that time, no increase will be passed on to the Ambassador, except in the case of carrier or routing changes beyond the control of Friendship Force International.
  7. The Friendship Force Ambassador hereby agrees to follow the provisions stated above and: a) to accept travel arrangements as arranged by Friendship Force International, where applicable b) to participate fully in the homestay, c) to pay the Ambassador Fee when due, d) to accept the decision making authority of the Journey Coordinator during the journey, and e) to accept that the journey is a public event and that the photograph and name of the Ambassador may be used by the local and national media and Friendship Force International in its publications.
  8. Upon acceptance of the Ambassador into the journey program, this Agreement shall become effective and binding upon Friendship Force International and the Ambassador, and shall be governed by the laws of the state of Georgia, USA. No representations, or statements, whether oral or written, other than those contained herein, shall be binding on Friendship Force International. In the event the Ambassador fails to abide by any of the terms and conditions of this agreement, Friendship Force International may terminate this Agreement without any penalty or liability to Friendship Force International.

**Ambassador Pledge:**

*My main objective as I join this journey is for cultural understanding and friendship. My health is good enough to keep up with the group activities planned and I know I will be responsible for carrying my own baggage.*

*As an ambassador, I am aware that my actions reflect on the club and the country from which I travel. I promise to conduct myself in an exemplary manner. I understand the Journey Coordinator of this journey has been given authority by the Friendship Force headquarters to lead and conduct this journey for the best interests of all parties concerned. The Journey Coordinator has the authority to remove any person from a host home who is not in compliance with the goals of Friendship Force International. In case there is need to use hotels as auxiliary housing, or a need for a single room on the add-on part of the journey, I will bear the expense.*

I have read the Ambassador Agreement provided with this Application and accept its terms. **Please initial**

I hereby agree to secure adequate travel and medical insurance (see 3. above) for the duration of the journey. **Yes No**

If **No**, I hereby waive the requirement of Friendship Force International which states that all participants carry travel insurance; and I agree to release Friendship Force International, its agents, the Ambassador Coordinator, my host and any vendors who participate in this program from liability, loss or damages.

I agree  , **please initial.**

I certify that I am 18 years of age or older and have completed this application to the best of my knowledge and believe it is true. **Please initial**

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<b>Signature of Ambassador</b>	<b>Date</b>	<b>Signature of Parent or Guardian</b>	<b>Date</b>
<b>If Ambassador is under 18 years old, both signatures are required.</b>			

Ambassadors under 18 must travel with a parent or guardian. Ambassadors under 16 must be hosted together with a parent or guardian.

Name of guardian for youth under 18: \_\_\_\_\_

\*If I am below 18, I am including a letter of responsibility by my guardian, parent or adult supervisor allowing me to take part in all activities of this program.