



Fostering a Culture of Citizen Diplomacy

Citizen Ambassador Application

Submitting this form is not a commitment but an expression of your desire to travel with Sister Cities Yorktown (SCY). The information provided will be maintained at the Sister Cities office and you will receive updates as appropriate via mail and email. Additional applications may be required for specific exchange programs. Couples need to fill out separate applications. Please complete & return this form via mail or email to:

P.O. Box 735 Yorktown, Virginia 23692

Email: info@sistercitiesyorktown.org

Questions? Call 757-842-0645 or visit www.sistercitiesyorktown.org

PLEASE type or print clearly - complete all fields as appropriate.

Name (as appears on passport): _____
First Middle Last

Home Address: _____

City / State / Zip: _____

Email: _____ Phone # () _____ Home Work Cell

Date of Birth (required): _____ Student? Yes / No Grade Level: _____

School Name (note if homeschooled): _____

Please mark as appropriate:

Have you traveled with Sister Cities Yorktown in the past? Yes No If yes, when? _____

Please indicate your degree of certainty that you can travel on the upcoming SCY Delegation.

100% 90% 80% 70% Less than 70%

I'd like to travel as:

student adult (18 and up) chaperone translator

I have a US passport valid for up to 1 year from today. Yes No

I work in York County. Yes No

I am a current member of Sister Cities Yorktown (SCY)*. Yes No

*Adult membership of \$25 is required for travel, student memberships are free / Please include your check payable to SCY with this application if not a current member.

I have been active on the following SCY committee(s): _____

Are you allergic to **CATS**? Yes No Are you allergic to **DOGS**? Yes No

List of other Allergies: _____ / _____ / _____

Favorite Foods: _____

1. Have you ever studied a language other than English? Yes No

If your answer is yes, which language(s) and under what circumstances did you learn the language (e.g. as a native language, while living abroad, in a “language camp” or through independent study at home). **Please indicate those languages you are fluent in.**

2. Have you traveled or lived in another country? Yes No

If yes, where and under what circumstances?

3. List work, community service, hobbies, sports, instruments played, extracurricular and leisure activities that might be helpful to your participation and in placing you with a family.

I understand that SCY Ambassadors are expected to pay for their passport, air fare and spending money for all exchanges. The host city will provide housing (“homestay” with a local family), tours and most meals for the SCY delegation. If selected as a Citizen Ambassador, I understand that I will be required to abide by all the rules and regulations set forth by Sister Cities Yorktown, as well as attend all pre-travel educational sessions and meetings. I understand that I must be a member in good standing to travel with SCY and that a \$150 non-refundable administrative fee is required if selected for travel; payment is due upon selection.

I further agree to serve as a Citizen Ambassador for Sister Cities Yorktown and to share my experience with others upon my return. By submitting this form, I also agree to allow my name/image to be used to promote SCY’s exchange programs in printed and visual media (including but not limited to SCY’s website and Facebook page) should I travel with the organization.

Applicant Signature: _____ Date _____

For applicants under 18 only

Parent/Guardian Signature: _____ Date _____