

HOLT INTERNATIONAL Please print and mail form to: Holt International Mongolia Vision Trip PO Box 2880 Eugene, OR 97402 Mongolia Vision Trip PO Box 2880 Eugene, OR 97402

Print your complete name exactly as it appears on your Passport (LAST, First, Middle):

Permanent Mailing Address, City, S	State, Zip:			
Primary Phone:		Cell Phone:		
E-Mail:		Prefered Name for Tour Name Tags:		
Occupation:		Education (if currently in school):		
Gender You Identify As:	Date of Birth:	Age at Time of Tour:		
Passport Number (Please include al	ll numbers, including zeros):	Expiration Date:		

You must have a valid United States passport for travel in Mongolia. If you do not have a passport, you must apply immediately, and notify Holt of the number as soon as you receive it.

Please indicate which information you authorize Holt International to release to members of your tour group:	Your name: Home State:	Cell Phone: E-Mail: Home Phone:	Age: Please DO NOT release my information:

In case of emergency, please list at least one family member NOT joining the tour.

Name:			Relationship to yo	ou:
Address:				
City:	State:		Zip:	
Primary Phone:		Home Phone:		

Medical Information: Please print clearly and fill out the entire form. Please attached a separate page, if needed. Holt is requesting this as part of your background information but makes no claims regarding the provision of medical services. Holt staff and tour operators are not medical professionals and are unable to offer medical intervention beyond assisting afflicted travelers to obtain care at a treatment facility. If you require either prescription or over the counter medications you should travel with a supply that exceeds your needs for the expected length of the trip. Assume that any medications available in the U.S. are unobtainable during travel. Know your insurance coverage's conditions regarding health care while you are out of the country. This information will remain confidential.

Please list current medications, including dosage & reason for taking:

Please describe any known medical conditions that are currently under treatment or being monitored:

Please list current ALLERGIES to medications, food, insects, or other substances:

Do you have any dietary restrictions? Meals typically consist of beef, fish, pork, vegetables, rice and soup. (Please be aware that alternatives may be unavailable or very difficult to arrange.)

Do you have any physical limitations that may limit your participation in physical activities?

Have you received any psychiatric, psychological or counseling treatment during this last year? If yes, please explain.

Any other major illnesses, surgeries, treatments, hospitalizations or conditions that we should be aware of?

If you have a history of any of the following conditions, please explain:

Arthritis	
Allergies	
Asthma	
Cancer	
Depression	
Diabetes	
Epilepsy	
Heart Disease	
High Blood Pressure	
Substance Abuse	
Psychiatric Disorder	
Rheumatism	

The Holt Vision Trip to Mongolia can be both exciting and challenging. It will undoubtedly be one of the most profound experiences in your life. You may encounter things that you may only have imagined: Aspects of another culture, a connection to a heritage you might not know much about, and new feelings you might not have expected. On this trip you will probably experience a wide range of emotions, joy to sadness, as you interact with children and families living in poverty. Some days can be physically and/or emotionally strenuous, with long bus rides and walks, and very hot, humid, and at times rainy weather. Food will be different from what you have experienced in the USA. Please understand that though you may have special dietary requirements, you may not always get what you want. The most important thing is to be flexible and keep an open mind. You will be a guest in a foreign country, and the rules at home may not apply. The following questions will help us get to know you better, and help you think about how you will handle these new and exciting experiences. You are welcome to use additional pages.

Please share your hopes and expectations for your trip to Mongolia.

Have you ever traveled to a foreign country? What was it like for you?

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You may wish to complete all trip forms and mail them all at the same time. Please keep a copy for your records.