



NICOLÁS FUND FOR EDUCATION  
Trip Application

Please complete all fields. Once complete mail the \$100 deposit to your trip leader or to the NFE office and email to either Kathy Riper or Becci Merritt. See below for further instructions and postal and email addresses.

Travel Date that you are applying for: \_\_\_\_\_

**Personal Information**

Full Name: \_\_\_\_\_ (nickname) \_\_\_\_\_

Birth date: \_\_\_\_\_

Address: \_\_\_\_\_, \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**Passport Information**

Name on passport: \_\_\_\_\_

Passport # : \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Country of Issue: \_\_\_\_\_

\*Please also submit a good quality copy of passport.

**Emergency Contact Information**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_, \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Information for required traveler's insurance

Beneficiary Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please answer the following:

1. Why are you interested in participating on this NFE Education Team trip?
2. Please briefly describe your Christian faith and how it has guided you toward participating in this Nicolás Fund for Education trip.
3. What church do you attend and how frequently do you attend worship?
4. If you are not a practicing Christian, what is your level of comfort of participating in the team devotions and prayer?
5. Do you speak Spanish? Please describe your degree of fluency. (Note: Spanish fluency is not a requirement to participate.)
6. Do you have any health concerns that might impact your ability to participate in trip activities or travel? Please describe.
7. Do you have any particular dietary restrictions/needs?
8. Do you have any particular personal habits or sleep patterns that need to be taken into consideration in planning room arrangements? (Note: Trip participants will generally share a double or triple room with roommates.)
9. Are you able to make a firm commitment to attend 80% of the four pre-trip team meetings to prepare for the trip? (If you are unable to attend most pre-trip meetings, please make arrangements with your team leader to see how you can participate in planning and team responsibilities.)
10. List any prior experiences you have had which have helped you prepare for this experience (prior mission trips, education/teaching experiences, working with children professionally or as a volunteer, ministry in the community, Bible study groups):
11. List your interests, abilities, and hobbies:

**Please rename the form using your name (e.g. NFE Trip App John Doe) and mail along with your deposit.**

If you have questions concerning this form, please call Kathy Riper at 206- 324-1234 or Becci Merritt at 425-557-4204. Please e-mail the signed application to Kathy Riper at [kathyriper@hotmail.com](mailto:kathyriper@hotmail.com) or Becci Merritt at [beccimerritt@comcast.net](mailto:beccimerritt@comcast.net). If you prefer to fax, you may fax it to Becci Merritt at 425-657-0465.

Mail trip deposit (\$100) directly to the Team Leader or the NFE office:

Nicolás Fund for Education  
9311 SE 36th Street, Suite 202  
Mercer Island, WA 98040

Check should be made out to “Nicolás Fund for Education” with the trip dates in the memo line. Do not put your name on the memo line, but put a Post-It note on the check with your name.

The deposit indicates your intent to participate on an NFE Impact Team trip. Your deposit check will not be cashed until you are confirmed as a participant on the trip dates requested. If you have questions regarding this Impact Team experience please contact Kathy Riper, Becci Merritt or your team leader(s) for the trip.