## **Antioch Chichibu Sister City Organization**

## ADULT APPLICATION FOR DELEGATE TO CHICHIBU JAPAN Summer 2015

DEADLINE FOR APPLICATIONS: April 15, 2015 Visit Dates: Tuesday July 14, 2015 to Tuesday July 28, 2015

Name:			_
Age Birth date			_
Address:			
	Street	City	Zip
Telephone (Home)		(Cell)	
Email: Best		Best Way to Contact:	
PART I:	Personal Statement Write a personal statement of application.	of why you wish to visit Chich	ibu. Attach your statement to this
PART III:	Mail this application to:		
	PO Box 933 Antioch CA 94509		
	Or email it to: selamander@	<u>@msn.com</u>	
Do you ha	ve a valid passport?yes	no	
	uggest that you apply immedia . http://www.travel.state.gov/p	, , ,	*

## **Ticket Purchase Notice**

It is the intent of the Sister City Organization to purchase tickets at the lowest possible price, which will be obtained if tickets are purchased in "bulk" through the Organization. Unless requested otherwise by the delegate, ticket fees are non-refundable. Although the Sister City organization will facilitate the purchase of tickets to allow the lowest possible cost, negations to change of flights or for refund, if any, will be between the delegate and the airline.

By submitting this application, the applicant agrees that the Sister City organization is not responsible for the cost of the tickets after purchase due to change of plans by the delegate.