



Texans for Peace Visit with Iraqi Women and Families in Jordan – April 2007 – DELEGATE APPLICATION

Please e-mail or mail your completed application, along with a copy of your passport (the page that includes your photo, name, and passport number) by January 29, 2007 to: charliej@texansforpeace.org or Texans for Peace, 11900 Metric Blvd., Ste. J-163, Austin, TX 78758

1- PERSONAL DATA

Please type or print clearly and use additional pages if necessary:

Name: _____
First, Middle, and Last Names AS ON PASSPORT Date of Birth _____
Place of Birth (City, State) _____ Father's Name (first name only) _____

Home Address: _____
Street or PO Box Telephone (home) _____
City, State, Zip Telephone (cell) _____

Work Address: _____
Your full job title (If you are retired, please mention your last title before retirement)
Organization Telephone (work) _____
Street or PO Box Fax _____
City, State, Zip _____

Have you ever worked for or with the United States government? (If yes, please explain when, where, in what capacity, and your position.) _____

E-mail: _____ E-mail2: _____

Citizenship: _____ Passport #: _____ Exp. Date: _____

Previous involvement, if any, with Texans for Peace or other Texas peace organizations: _____

Religious Affiliation (optional): _____ Ethnic Group (optional): _____

Previous involvement on issues of peace/human rights or the Middle East: _____

How did you learn about the T4P Amman Delegation? _____

Personal experience/training you feel is relevant to this delegation:

2- INTERNATIONAL EXPERIENCE

Have you lived abroad? If so, where? _____ When and for what reason did you live abroad? _____

Have you ever been to Iraq? Elsewhere in the Middle East? How many times? What was the purpose of your trip(s)? _____

3- AREAS OF INTEREST

Although we cannot promise to accommodate your requests, we will try to cater the trip to your interests.

Topics you would like to investigate: _____

People/ Organizations you would like to meet with: _____

Why do you want to go on this delegation? (Continue on additional page if necessary.)

Do you have relatives or friends in Amman whom you would like to visit with during your trip to Amman? If so, please list their names, addresses, and job titles.

4- LANGUAGES

Arabic _____ Other _____
(Please indicate: (A) excellent (B) good (C) fair (D) poor.)

5- COMMITMENTS & STATEMENT OF RESPONSIBILITY

We ask delegates to make a few basic commitments during the trip and upon your return. We would appreciate your indicating your general agreement to the commitments below or briefly explaining any reservations you have.

On the Trip:

- To work as a team member and abide by the decisions of the group and the leaders.
- To attend and be punctual at all meetings of the delegation.

- To consult with the team leaders about meetings with friends or additional contacts to make sure that they do not create scheduling conflicts.
- To be respectful of the people and cultural mores of Jordan, Iraq and the Middle East.
- To act in the spirit of nonviolent engagement throughout the trip.

On Return:

- To work to foster friendship between Iraq and the United States.
- To work to educate public opinion about Iraq and U.S.-Iraq relationships.
- To be a resource for future peace delegates.

Please explain what you would do and how you plan to achieve the goals mentioned above (regarding follow-up upon your return):

Are you affiliated with an organization/group that would be able to set up speaking engagements for you upon your return? If so, what is the name of the organization/group? (Provide contact information, if applicable.)

Additional comments _____

I am aware that I am entering a situation that may at times be tense and that there may be danger of violent conflict occurring while I am there. I understand that this is a mission of peace undertaken by people committed to nonviolence and an end to war.

I hereby release and agree to hold harmless Texans for Peace and its supporting members, employees, directors, agents and successors from any and all liability or claims, demands rights, causes of action, whether known or unknown, brought by me or on my behalf or by my heirs, beneficiaries, executors, or assigns.

I am at least eighteen (18) years old and have read and understood the above statements.

Signed (applicant) _____ **Date** _____

6- Biographical

Please attach a brief biography and/or resume of your education and work experience if available.



Texans for Peace Visit with Iraqi Women and Families in Jordan – April 2007 – MEDICAL INFORMATION FORM

Name: _____ Age: _____
(Last Name, First Name, Middle Initial)

My blood type (if known) is: _____ I am allergic to medication: _____

My Doctor in the U.S.: _____ Telephone: _____

My Address: _____
(Street and number) (City, State, Zip)

Have you ever been hospitalized for medical or psychological reasons? _____

(Please list dates and reasons for each hospitalization; use additional page if necessary)

Are you currently under medical or psychiatric treatment? _____
(Please describe briefly)

Please describe your general health: _____

Allergies: _____ Dietary restrictions: _____ Special needs: _____

This delegation may require some walking and carrying of luggage. Do these pose any difficulties for you? If so, please describe:

In the event of a medical or other emergency please contact:

(Name) _____ (Relationship to you) _____

(Address) _____ (City, State, Zip) _____

Daytime phone: _____ Evening phone: _____

FAX: _____ E-MAIL: _____

Signed (applicant) _____ Date _____