



Visiting Daylight: an Overview

Thank you for considering a trip to Daylight Center and School in Kenya. Please note that applicants must be 18 years of age or older and that a \$100 non-refundable deposit is required.

Daylight's Mission Statement

Inspired by the love of Jesus, Daylight Center and School shelters, feeds and educates nomadic children from rivaling tribes in western Kenya, empowering them to imagine a better future together and end the conflicts tearing their communities apart.

The cost of the trip is \$1,300 plus airfare (approximately \$1,300-\$1,800). This will cover all in-country costs (food, bottled water, transportation, sleeping quarters, Kenya VISA, and entry to a wildlife game park).

Three mandatory team meetings will be held. The first meeting will be 6-8 months prior to trip—**the cost of airfare will be due at this meeting**. The second meeting will be two months prior to the trip and the remaining \$1,200 will be due. The third meeting will be two weeks prior to the trip. The specific dates of these meetings will be emailed to you upon acceptance of your application.

As a Daylight team member you will have the unique opportunity for Skills Sharing with the Daylight community. Skills Sharing is choosing a topic of interest to you (hobbies, abilities, talents) to be presented to a specific group (kids, teachers, mothers, etc.). If you prefer, you may co-lead with another trip team member to present two to three one-hour sessions regarding your chosen and approved topic. This will be a fun way to interact with the community and share your knowledge. This activity will be further discussed at the first team meeting.

Your travel experience may be “rugged” as the electricity may go out, showers may not be available daily, and you may be using outhouses. We will further discuss this at the team meetings, so you will feel prepared for the experience.

When you travel with Daylight, you are part of a team where you are expected to stay with the group and participate in group activities. After “lights out” you will not be able to attend other activities. Your group leader, in conjunction with Daylight Kenya staff, will make all decisions during the trip. Please remember that you will be an extension of Daylight and representing Daylight on this trip.

As we will be working with children, you will need to participate in a background check.

If you have any questions, please email info@daylightcenter.org or call 612-293-7476.



Travel Application for Daylight Center and School

Full name (as it appears on passport): _____

Passport #: _____ Passport expiration date: _____
(Passport must be valid 6 months after your expected **return** to USA)

Address: _____

Phone: _____ Email: _____

Information for Background Check

Driver's License #: _____ Driver's License State of Issue: _____

Social Security #: _____ Date of Birth: _____
(If you prefer not to provide this information in writing, please call 612-293-7476 to provide this information over the phone.)

Questions

How did you hear about Daylight Center and School?

Why do you want to travel to Daylight?

What are your expectations, if any?

What do you anticipate will be challenging to you or make you worry?

What is your current occupation?

What other abilities, talents or hobbies do you bring to the group?

List at least three words your family and friends would use to describe you:

Write a brief statement of your faith:

Have you ever traveled to a developing country? If yes, when and where:

Please give two personal, non-family references:

1. _____ Phone #: _____
2. _____ Phone #: _____

Emergency Information

Name: _____ Phone #: _____ Relationship: _____

If you currently take prescription medications, what are those medications? (This information is confidential to the team leader to ensure your safety on the trip.)

Do you have any physical limitations of which we should be conscious, or that could hinder the safety of you or other members of the team (i.e. serious allergies, back problems, poor hearing or eyesight, limited mobility)?

Is Daylight trip leader authorized to approve medical treatment? Yes No

Is participant covered by personal/family medical insurance? Yes No

If Yes, name of Insurer: _____

Policy or Group Number: _____

Trip Waiver and Release Form

Sponsoring Organization:

Daylight Center and School
406 Wacouta St. #106 Saint Paul, MN 55101

Description of Activity:

Travel to and from Kapenguria, Kenya. Visiting and sharing skills at Daylight Center and School in Kapenguria, Kenya.

Trip Participant's Name: _____

Participant Agreement

- In consideration for the opportunity to participate in the above activity, the participant acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity.
- The participant accepts personal financial responsibility for any injury sustained during the activity or during the transportation to and from the activity.
- Further, the participant promises to indemnify, defend, and hold harmless Daylight Center and School or its agents, employees, volunteers, or any of its representatives for any injury related directly or indirectly out of the described activity or transportation to or from the activity, whether such injury arises out of the negligence of Daylight Center and School or otherwise.
- If a dispute arises over this agreement or any claim for damages arises, the participant agrees to resolve the matter through mutually acceptable dispute resolution process.

Refund Policy

The participant acknowledges that the \$100 application deposit is non-refundable. The participant also acknowledges that once airfare has been purchased, the participant is independently responsible for requesting a cancellation and refund from the airline, and understands that a refund may not be granted by the airline (see Delta's cancellation and refund policy for more information). The remaining \$1300 for in-country costs may be refunded on a case by case basis by Daylight Center.

Participant Signature: _____ Date: _____

Please return your completed application to info@daylightcenter.org
or to Daylight Center, 406 Wacouta Street #106, Saint Paul, MN 55101.

A check for the \$100 non-refundable deposit must be enclosed for your application to be reviewed.
Email applicants may visit daylightcenter.org and "Donate Now" to pay the \$100 non-refundable deposit.