



600 1st Ave, Suite 112
 Seattle, WA 98104
 206-200-2418
tripmanager@GuatemalaVillageHealth.org
<http://www.GuatemalaVillageHealth.org>

TRAVEL COMMITMENT NOTIFICATION

Traveler Name(s):

Trip MM/YY:

I have made am planning the following travel arrangements:

Knowledge of arrival time tells us when to meet you for pickup in Guatemala. Knowledge of departure time from Seattle aids us if any urgent hand carry item is needed to Guatemala. Knowledge of flight number enables us to track your flight progress. Please call us if your flight gets cancelled and you end up on a different flight#.

Travel to Guatemala City International Airport (GUA) - PLEASE LIST EACH LEG:

Carrier	Flight#	Departure City	Departure Date	Departure Time	Arrival City	Arrival Time

Upon arrival, please do not leave the airport without us in Guatemala City or we will be very worried trying to track you down.

Return to US - DEPARTURE ONLY:

Carrier	Flight#	Departure City	Departure Date	Departure Time
		GUA		

I want to stay at the team hotel before and after the trip: Yes-Before Yes-After No

I am planning personal pre/post mission travel: Yes-Before Yes-After No

To (location):

Many team members have been to Guatemala before, and are eager to share ideas of things to do and places to stay.

Rent a phone - 200 minutes for \$30: Yes No

If you just want to use a phone for a few minutes a day to check-in you are welcome to use the team phone (no charge). If you anticipate more need, please check the box. Note: service is not always reliable but is better than none.

Dietary Preference/Restrictions:

If you prefer vegetarian meals, have any dietary restrictions or allergies to foods please specify here.

Travel Expense Payment:

Included: GUA Airport pickup/dropoff, Transportation, Room & Board outside of Guatemala City, and In-Country Staff Support

Excluded: Hotel costs in Guatemala City, Alcohol, Souvenirs, Snacks, any personal travel

Only one Week of Travel Expenses (\$1100/person)	_____	(individual arrangement)
Ten Days of Travel Expenses (\$1400/person)	_____	
Both weeks of Travel Expenses (\$1850/person)	_____	
USB internet stick (\$30, Optional)	_____	
Phone rental (\$30, Optional)	_____	
Deposit	-\$250	
Donation (towards OTC meds, translators, etc)	_____	
Total	_____	

Please make checks to "Guatemala Village Health" - GVH is an IRS recognized 501(c)3 organization, your expenses in support of the mission are tax deductible.

Please Send or Email form with Payment To:

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