

Dentistry For All

2012 Mission Trip Application

PLEASE ATTACH A SEPARATE PAPER IF YOU NEED MORE SPACE TO ANSWER ANY QUESTION.

Today's Date: _____ Trip Applying for: Feb/March 2011 OTHER

Name: (as it appears on your passport) _____

Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Email Address: _____ Date of Birth: _____

Phone number: _____ cell/home/work (please circle)

Alternate Phone Number: _____ cell/ home/work (please circle)

Passport #: _____ Passport expiration date: _____

Emergency Contact:

Name: _____ Relationship: _____

Phone Number: _____

I am a :

- _____ Dentist*** Please circle DDS/DMD
- _____ General Dentist
- _____ Specialist Dentist Please specify: _____
- _____ Dental Hygienist***
- _____ Registered Dental Assistant
- _____ Dental Resident Please specify program: _____
- _____ Dental Student Please specify year and school: _____
- _____ Non Dental Personnel

***Please attach a copy of your professional license

Languages Spoken:

_____ English Some/Fluent (please circle)

_____ Spanish Some/Fluent (please circle)

_____ Other _____ Some/Fluent (please circle)

Countries Lived in, Been to, or Worked in (other than US/CANADA) in the last 10 years:

Work History:

Do you have any criminal convictions in any country or any reason you may have difficulty with US or Guatemalan customs?

_____ Yes (if so, please attach an explanation) _____ No

Please explain any previous volunteer experience?

How did you hear about Dentistry for All?

Have you been on any other dental mission trips previously? If so, please list year, country visited and organization and contact name and number:

What motivates you to be part of our mission?

Do you have any limitations or physical conditions that would prevent you from fulfilling your role with Dentistry for All? (This information will not be used in volunteer selection)

Are you able to carry 50lbs of equipment? YES _____ NO _____

Do you have any dietary restrictions or allergies? YES _____ NO _____ If so, please list.

What specific skills can you contribute to our mission trip?

Dentistry for all schedules volunteers on an "as needed" basis. We will attempt to honor your preferences, however there are no guarantees as to dates or locations available.

My availability during February 3-March 14:

_____ I am available for wherever you need me.

_____ Maximum Number of working weeks I am available.

I am not available to be placed on the following dates:

Please provide one **employer/colleague** reference (name and phone #/email address)

Please provide one **character** reference (name and phone #/email address)

Volunteer expectations:

Costs: (US Travelers-Please contact trip coordinator for reduced costs)

One working week \$1900

Two working weeks \$2700

Three working weeks \$3300

Four working weeks \$3700

Five working weeks \$4100

*COSTS ARE IN CANADIAN DOLLARS: AS EXCHANGE RATES VARY ANNUALLY, VOLUNTEER COSTS MAY FLUCTUATE.

Recommended Travel Dates:

Comitancillo Week 1: February 23-March 5, 2012

Antigua area Week 2: March 3-March 11, 2012

El Remate Week 3: March 8-March 19, 2012

Guatemala City Week 4: March 17-March 25, 2012

Comitancillo Week 5: March 22-April 2, 2012

***These are the minimal recommended travel dates. If you would like to extend your trip either before or after your service time, you need to select your travel dates at the time of your confirmation. Any change to those dates will result in a change fee which will be your responsibility through the airline.

All DFA travel bookings are to be done by our DFA travel agent. Allowances for alternate arrangements must be cleared by the trip director.

Drinking of alcohol: During the work week, a beverage after work or with dinner is acceptable. Anything above and beyond that will not be tolerated.

Smoking: Smoking is not tolerated in public places. Smoking at the clinic will not be allowed at any time.

Drugs: Dentistry For All has a zero tolerance for the use of illicit drugs.

Packing: Each volunteer is expected to transport one 50-70 lbs bag of supplies provided by Dentistry For All to **AND** from Guatemala. A packing list of personal items will be provided to each volunteer and those items are to be purchased and transported by each volunteer at their own cost.

Immunizations: Each volunteer is required to receive and provide proof of the proper immunizations prior to travel at their own cost.

Travel insurance: Each volunteer is required to purchase at their own expense and provide proof of travel insurance prior to travel.

Health insurance: Each volunteer is required to have active health insurance.

Proof of Licensure: Each dentist and dental hygienist will need to provide a copy of their dental license. Please include with your initial payment.

Passport: Each volunteer must have an active passport. Passports expiring within 6 months of the mission trip should be renewed prior to travel. Please include a copy of your passport with initial payment.

While on this trip, you are an ambassador not only for your country but also for Dentistry For All. The organization has a code of conduct and a reputation that we have worked hard to develop and have built trust. If you can not adhere to the guidelines and policies we have established, your participation on the trip will be brought to an abrupt end at your own expense.

Volunteers will only be allowed to perform the tasks that they are allowed to professionally perform or tasks they have been trained to complete

Refunds can only be granted upon the discretion of the executive director of DFA. However, any refunds granted will be minus the cost of the airline ticket. It is the responsibility of the volunteer to contact the airline for a refund directly.

I have read and agree to all the volunteer conditions listed above and agree to those guidelines.

Signature: _____

Printed name: _____

Date: _____

WAIVER AND RELEASE/ASSUMPTION OF RISK AGREEMENT

I, _____ (name), hereby unconditionally release each of Dentistry For All and its officers, and all of their respective heirs, agents, representatives, affiliates and employees from all liabilities and responsibility related to or involving my health, safety or personal belongings for the planned trip to Guatemala, beginning on or about February 23, 2012 and presently expected to continue through or about April 2, 2012.

I take full responsibility for obtaining all my immunizations and their costs.

I will also be responsible for any personal health, life accident, disability or liability for myself or my belongings. I will obtain travel insurance to cover any emergency expenses. I am aware that there are hazards and risks to my person and property associated with The Dentistry For All trip. Such hazards and risks include but are not limited to: death, disability, loss of ability to maintain earnings and loss of property due to accident, disease, terrorist acts, weather conditions, inadequate medical services and supplies, war, wild animals, and criminal acts. I volunteer my participation on behalf of Dentistry For All despite such hazards and risks, and I assume the risk of death, injury and property damage, and property confiscation associated with such risks, and agree to hold each of Dentistry For All and its Board of Directors, and all of their respective heirs, agents, representatives, affiliates and employees harmless from any liability associated with the foregoing.

I attest and verify that I am physically fit and have no medical conditions that would prevent me from participating on this trip.

I unconditionally waive and release any and all claims for damages which I may have against each of Dentistry for All and its Board of Directors and all of their respective heirs, agents, representatives, affiliates and employees, and I hereby agree to indemnify them against any and all claims, loss, expense, or liability, that any of them may incur as a result of any injury, harm or loss that I may incur or sustain or any claim that may be asserted against any of them by any third party as the result of any such injury, harm or loss.

I have read the complete application and agree to the terms listed above.

Signed: _____

Name: _____

Date: _____

Please send application to:

Dentistry For All

c/o Shane Fisher

541 E. Erie Street #313

Milwaukee, WI 53202 USA

Or email scanned version to kidsdentist@sbcglobal.net

Or fax to (414) 266-1610

Dentistry for All Guatemala Packing List

Essentials:

- Passports – current and not to expire within 6 months
- Driver's license (only if able to drive a stick shift)
- U.S. dollars and American Express traveler's checks
 - Unless you are bringing down lots of money, U.S. Cash is the easiest to bring.

Meds, Immunizations, and First Aid:

- Ensure all immunizations are up-to-date
 - Required - Hep A and Hep B
 - Optional – Tetanus vaccine
- Malaria pills – recommended for those traveling to the El Remate
- Personal prescriptions – basic prescription drugs available if necessary (most antibiotics, etc) but bring extra of your own to be safe.
- Ensure you have enough of the common prescription drugs you take at home
- Multivitamins, band-aids, pain relief, anti-diarrheal, Pepto-Bismol, Imodium, natural tears, antibiotic ointment, Benadryl

Clothing:

- Clinic attire – scrub tops and bottoms (men can wear shorts), 2 pairs per working week needed
- Dark colors as light tend to get dirty quickly
- 5-6 day change
- Bathing suit
- Fleece top or sweatshirt for evenings and mornings (especially in Comitancillo & Guatemala City)
- Off duty – very casual, weekend wear.
- Rain gear – inexpensive
- Good walking or light hiking boots, sandals (Teva's or Keen's) for working in

Toiletries & Personal items:

- Basic – deodorant, facial soap, toothpaste, hand cream
- Hand sanitizer – Purell (pocket size), Wet-Ones (or similar)
- Extra contact solutions, sunscreen, feminine products

- Hand mirror, sewing repair kit
- Flip flops for shower
- Personal medications
 - Also recommended to bring with you anti-diahreals/gravel-dramamine/cold medications/Tylenol/etc..

Additional Items:

- Sunglasses, ear plugs, hat
- Insect repellent (good for fleas), lavender oil
- Swiss Army knife or Leatherman tool
- Flashlight, extra batteries
- Money belt and/or passport carrier
- Camera, extra batteries, memory cards, film
- Spanish/English dictionary and personal books to read
- Garbage bags (black or white)
- Water bottle
- Personal snacks – power/granola bars, supplements, candy (many snack items can be purchased in Guatemala)
- One to two rolls of Duct tape

Dental needs:

- Gloves – You need to bring your own gloves (powdered gloves recommended due to the heat in certain locations)
 - Average 50/working day packed in zip-lock bags not boxes
- Headlamps – recommended for both dentists and assistants. Mountain Equipment Co-op has a good selection, reasonable priced. Wider field of light better, or dual-function (wide and focused adjustable). Bring extra batteries
- Masks – recommended, not needed for each patient

Miscellaneous:

- Jewellery – leave all valuable jewellery at home – earrings, bracelets, chains, rings - including wedding rings, (wedding bands are okay), etc.
- Maximum weight – Each person is allowed only **one** personal bag. Please be aware that maximum weight is now just 50 lbs per bag. This has meant more difficult packing of all of the dental supplies. I recommend a smaller personal bag that can be packed inside one of our hockey bag supply bags, so that we may then pack around it. Alternatively, you may pack in your own hockey bag with space for additional supplies or sundries. Remember packing space in the vans is VERY limited, so no stiff-framed or large luggage-type bags please. Your second bag will be a supply or equipment bag.
- Carry-on bag – recommend a back-pack as you will need it for travel within Guatemala when working and off days.

- Travel insurance – required – check with your credit card or personal insurance companies.
- Gifts – please adhere to group suggestions about gift-giving. Can lead to problems if at the wrong time or place. Please clear gifts with drip director in advance.
- Photography – you should always receive permission before taking photographs of people, including during dental work.
- Visa Credit Card—Visa is the only credit card accepted at many restaurants and shops...You can try and use a different type of card, but frequently, you will be told they only accept Visa.

Location Details:

- Comitancillo: Weeks 1 & 5
 - Cheap sleeping bag & camper's pillow required – will usually donate to AMMID or the women's group that live in the mountain villages. Wal-Mart and Canadian Tire have bags in the \$25 range. Good for +5 C/40 F
 - Towel and face cloth required (can leave behind)
 - Cool at night and early mornings
 - Women – slacks and long sleeves, shoulders and knees to be covered at all times when in public, can wear shorts and more casual at hotel
 - Meals provided
- Guatemala City & Antigua area: Week 2 (Antigua) & Week 4 (Guatemala City)
 - Cool in evenings
 - Breakfast included and lunch, dinner on our own (delivery or restaurants)
- El Remate: Week 3
 - Malaria area, medication recommended
 - Can get very hot – working conditions most days will be 32 to 36 above C, hotel is on a lake (bring bathing suits), very healthy meals provided
 - Require towel & face cloth (Can leave behind)
 - Hotel is very nice
 - We will be sleeping under mosquito netting and a sheet, need insect spray (for fleas) and lavender oil (for spiders).