# Fundacion Corazon Del Siervo Short Term Team Registration Dominican Republic

Group Name:
Address:
City, State & Zip Code:
Phone Contact:
Email:
Team Leader:
Phone: Email:
Team Size: Male Female: = Total
Will there be children on the team: YES NO How many?
Dates of Trip:
Airline Flight Number and Arrival Time:
Airline Flight Number and Departure Time:
Please note if all members arrive together, or if some arrive on other flig

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Please send a list of members, and their passport number with expiration date. Also include their age and occupation, and in what capacity they will serve on the team: Logistics, pastoral care, medical, helps ministry, prayer team, construction, childrens ministry etc.

Are there any specific Health Conditions or dietary restrictions of any team members?

For you team members traveling, please give copy of following information to keep with them at all times:

## **Banking Information for paying fees:**

Non Refundable Deposit of \$50 pp is due at the time of securing the team dates, preferably 3 months prior to the desired arrival. All other fees must be received 30 days prior to arrival.

## Fees can be deposited directly to:

Bank of America Corazon Del Siervo, Inc.

Acct number: 2290 3038 9093

### Wire transfers carry a \$25 fee:

Swift No: BOFAUS3N

Routing number: 0260 0959 3 Acct No.:2290 3038 9093

#### Or may be mailed to:

Corazon Del Siervo, Inc 209 North Lime Avenue Sarasota, FL 34237-6123

Please copy the following info for all team members to carry in case of delay in flight or they get separated from the team for any reason:

Fundacion Corazon Del Siervo RNC# 430090301 Casa de Huespedes Calle Juan Suarez #4, Pueblo Chico Manoguayabo, Santo Domingo Oeste

Guest house US line: (941) 861-0389 Dom Rep Line: (809) 372-5039

Dom Rep Contact info: Dr Francisco & Diane Sabado (809) 330-5071/350-5071 House (849) 936-4575

<sup>\*</sup> Be sure to include memo with team name & dates of trip