



E. Food service (facility's kitchen staff; chapter staff; storage for donated food; SC prepared meals)

F. Safety and security provisions (provision for medical emergencies, dentist, designated hospital, first aid kits, etc.; CPR trained person on site; lifeguard)

G. Site Restrictions (i.e. alcohol consumption, campfires, number of people on site, etc.); must be fully explained in Seminar Camp information sent to delegates and staff.

H. Site Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Phone # \_\_\_\_\_

II. Seminar Camp Personnel

Home Staff 1

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address \_\_\_\_\_

CISV Experience

Home Staff 2

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

E-mail address \_\_\_\_\_

CISV Experience

III. Program (please indicate possibilities)

- A. Cultural Enrichment
- B. Education
- C. Excursions
- D. Sightseeing
- E. Local resources for seminars

IV. Chapter Personnel

President \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Seminar Camp Planner \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

V. Chapter Finances

- A. Is there a Seminar Camp fund?
- B. Fundraising activities planned to sponsor a Seminar Camp.

VI. Attach (1) a Letter of Intent for use of the site signed by your planner and a site official and (2) a Seminar Camp budget to this application.

Application prepared by \_\_\_\_\_

Title \_\_\_\_\_