



Ignatian Family @ World Youth Day Sydney, Australia, July 2008 Application Form

Please fill all sections and send to MAGiS Office, Mount St. Jesuit Centre, 114 Mount Street W1K 3AH.
To contact us: telephone - 020 7495 1673 / 7629 6936; email enquiries@magisuk.info

Section 1: Who am I?

(please include your details as they appear on your passport)

Full Name(s): _____ Surname: _____

Address: _____

Postcode: _____

Date of Birth: _____

Nationality: _____

Email: _____

Telephone(s): _____

Mobile: _____

Section 2: Tell us a bit about yourself

Have you been to WYD before? When? What was your experience like?

Where did you find out about MAGiS 08?

Why are you attracted to this MAGiS 08? What are you hoping to learn? What are you hoping to share with others? *(if you wish to add further details please use a separate sheet)*

Would you be willing to be a small group leader during our pilgrimage? *(circle as appropriate)* Yes No

Section 3: How would you like to join us?

I would like to

- Option 1 Standard package:** service placement, Ignatian Gathering and WYD
(returning around July 21st)
- Option 2 Extended package:** including pilgrimage 20-27th July
- 'Open' travel plans** - you may be considering travelling independently of the MAGiS group, whilst still wishing to join us for World Youth Day itself. In this case you will need to make arrangements for travel independently.

Section 4: Emergency Contacts and Medical Details

Name of Next of Kin: _____

Emergency Contact Address:

Emergency Contact Telephone(s): _____

Do you have any medical, allergy or dietary requirements that we need to know about?

Section 5: Reference

Please provide details below of a referee who can support your application to go on pilgrimage.

Name and address of referee:

Telephone number: _____

Please ask your referee to read and sign the statement below:

I support the applicant in their wish to travel with MAGiSUK to World Youth Day in 2008 and I confirm that, to the best of my knowledge, the applicant is fit and able to participate fully.

Signature: _____

Date: _____

Section 6: Declaration

I confirm that I am fit and able to travel. I will do my best to participate fully in all MAGiSUK events. I am aware of the dates of meetings prior to and after the pilgrimage.

Signature: _____

Date: _____

<p>This form needs to be sent to the MAGiS Office (address above) along with a deposit of £100. Cheques made payable to MAGiSUK. A separate medical form will be sent to you nearer the time of travel.</p>
