



# *Santa Cruz al Salvador*

2500 Soquel Avenue • Santa Cruz, California 95062  
[www.santacruzalsalvador.org](http://www.santacruzalsalvador.org)

## **Information Form**

Santa Cruz al Salvador welcomes you to the El Salvador Sister Parish Delegation. The El Salvador Delegation is an educational seminar and pilgrimage program and as such we see your participation as a commitment to begin this process now and continue it upon your return. Thank you for your interest and commitment to building solidarity with the people of El Salvador.

Passport Number:	
Name on Passport:	
Name that you liked to be called:	
Trip Dates:	
Address:	
Home Phone:	
Work Phone:	
Email:	
Occupation:	
Spanish Ability (none required):	Fluent      Good      Fair      None
General Health:	Excellent      Good      Fair
Do you have a medical condition?	
Please list any medications you are taking:	
Allergies (food and drugs	
Emergency Contact Name:	
Emergency Contact Phone:	
Relationship to you:	



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I, \_\_\_\_\_, have voluntarily decided to join the Santa Cruz al Salvador Delegation to El Salvador from \_\_\_\_\_ to \_\_\_\_\_. I have also received and read the orientation packet and understand the health and safety issues as well as what is expected of me as a member of the delegation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date