

WINSHAPE CAMPS TRAVEL EVENT ACKNOWLEDGMENT

YEAR
2026

[Please PRINT legibly]

PARTICIPANT NAME: _____
Last First Middle

TRIP LOCATION: _____ DATES: _____ to _____

I, the undersigned Participant in a WinShape Camps travel event, understand that I have the opportunity to travel to the Location described above during the travel dates described above (the "Trip"). I understand and acknowledge that this is a special travel opportunity that will or may include, without limitation, mission service, volunteer activities, sightseeing and exploration, and work/assistance on projects (collectively, the "Activities").

I understand that my participation is completely voluntary and is not required as a condition of employment with WinShape Camps. I acknowledge and declare that a primary purpose of this Trip is to perform mission service projects for the benefit of other persons, communities, or institutions (including religious or educational institutions) and for my own personal and spiritual fulfillment.

I understand that I will be expected to contribute toward the Total Trip Cost (below), in an amount which may depend in part on previous experience with WinShape Camps. I also understand that my participation in the Trip and Activities might not be feasible without my contribution. I understand that I will be reimbursed for my Brazil visa expense after completing the trip.

Total Trip Cost includes: (1) transportation to and from the US departure airport; (2) airline tickets to the Location; (3) airport entrance and exit taxes (if applicable); (4) transportation in and around the Location; (5) international insurance (if applicable); (6) lodging and accommodations; (7) meals during the projects; and (8) a Brazilian visa (if applicable). Total Trip Cost and portion to be defrayed by WinShape Camps are as follows, along with the amount of my contribution:

TOTAL TRIP COST:	DEFRAID BY WINSHAPE:	MY CONTRIBUTION:
\$2,200	\$ _____	\$ _____

I understand that WinShape Camps may need to purchase airline tickets up to 12 weeks before the departure date in reliance upon my commitment (as stated herein) to participate in the Trip. By signing below, I am committing to participate in the Trip and, if for any reason I do not ultimately participate in the Trip, I will reimburse WinShape for one-half the ticket cost, in addition to the non-refundable deposit in the amount set forth below.

I understand that after WinShape Camps purchases airlines tickets on my behalf, I will have 24 hours to review for accuracy and request any changes. Any changes requested after the 24-hour review period will be paid for by the Participant.

I understand that WinShape Camps defrays the cost of International Project for participants who have accepted an offer of employment with WinShape Camps for the summer of 2026. If I withdraw my summer employment acceptance and do not work with WinShape Camps for the summer of 2026, I will reimburse WinShape Camps for the amount defrayed on my behalf. If I withdraw my summer employment acceptance or do not participate in the Brazil Trip, I will not be reimbursed for my visa expense

I understand that my contribution toward the Total Trip Cost must be received in full by WinShape Camps at least two months before the departure date, and that otherwise I will not be permitted to attend. Further, I understand that I am fully responsible for the following: (1) passport; (2) immunizations and medications, if needed; (3) excess baggage, unless authorized by WinShape; (4) food and drink other than meals during the project; (5) gifts and other personal expenses; and (6) a Brazilian visa, if needed.

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My non-refundable deposit of \$_____, due by _____ (date).

**I HAVE READ THIS ACKNOWLEDGMENT CAREFULLY AND I FULLY UNDERSTAND ITS CONTENTS.
I AM SIGNING IT VOLUNTARILY AND OF MY OWN FREE WILL.**

Participant Signature

Date

Primary Emergency Contact Name (& Relationship)

Emergency Contact Number

Secondary Emergency Contact Name (& Relationship)

Emergency Contact Number