

415.735.5407 • altruvistas.com PO Box 711366 18-1350 Volcano Road Mountain View, HI 96771

APPLICATION

CREATE YOUR CUSTOMIZED JOURNEY!

To get started just fill out this application. Your information will help us create unique and privately branded journey according to your interests and vision.

Please type or print clearly and feel free to use additional pages. If you have any questions or would like to brainstorm before you fill out this form, please call Malía Everette, at 415-735-5407.

- 1. Meet with your board, institution, organization, professional association, or group to discuss the destination and objective of your journey. Then set some tentative trip dates, trip length, program ideas and accommodation preferences.
- 2. Complete the application and assign a point person who will work directly with our Altruvistas staff. This person helps facilitate communication and will work with us to evolve the journey till it is just right.
- 3. After we finalize all the details for your journey, including itinerary, inclusions, deadlines, costs and inclusions. Then we will ask you for a set up fee. This set up fee serves as the deposits for 2 passengers and will be transferred to your tour cost two months before the departure date. The set up fee guarantees your delegation's space on our calendar and is nonrefundable. However, in the case of low recruitment this set up fee may be transferred to another date.
- 4. Send this application to: PO Box 711366, 18-1350 Volcano Road, Mountain View, HI 96711 or scan and email it to malia@altruvistas.com After receipt of your group's application we will confirm its receipt and will immediately start working to create a first draft agreement for you.

ALTRUVISTAS DESTINATION (IDENTIFY THE COUNTRY)

Name of collaborating group					
Address		City		State	Zip
Work phone	Fax		E-Mail		
Name of Group Contact					
Address		City		State	Zip
Work phone	Fax)* «	E-Mail		

CUSTOMIZED JOURNEY INFORMATION

Proposed title	Length of trip (HOW MANY DAYS?)
Describe briefly the purpose or objectives of your Customized Reality T	our:
If you have a URL of your mission statement, or curriculum please share	

CUSTOMIZED JOURNEYS A P P L I C A T I O N

Dates of proposed tour: First choice	Alternative dates				
Do you need assistance with flight arrangements?	If yes, where will your group depart from?				
Estimated size of your group	Minimum and maximum group size?				
Who are your members?					
What type of accommodations would your group prefer (GUEST HOUSE, 3 STAR, 4 STAR OR 5 STAR)?					
How many meals a day would you like included?					

What type of accommodations would your group prefer (GUEST HOUSE, 3 STAR, 4 STAR OR 5 STAR)?
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SHARE YOUR VISION
Why did you choose this destination?
Do you have any fundraising goals or need to cover your organizer's salary and costs for this journey?
(PLEASE SHARE YOUR FINANCIAL NEEDS AND GOALS):
Do you need to have one representative or trip facilitator subsidized in the total cost of the tour?
(PLEASE LIST YOUR EXPECTATIONS AND MENTION IF YOU NEED RT AIRFARE TO THE DESTINATION AS WELL):
To help us tailor your program please list the geographical areas, UNESCO World Heritage sites, institutional site visits, and organizations your group would like to meet with:
Do you have any donations to build into the trip budget for an identified organization or partner?

(PLEASE SHARE NAME OF ENTITY AND AMOUNT)

New Year's/Winter Break

President's Week





Summer

Spring/Easter Break