# THE TEL GEZER WATER SYSTEM EXCAVATION PROJECT 2018 Season 27 May – 15 June

Volunteer Application Form

Last    First    Middle      Current Mailing Address:	
Number and Street	
City State/Province Zip/Postal Code Cou	
	ntry
Permanent Address (if different from above):	
Phone: Home ( ) Work ( )	
Email:	
Person to be notified in case of emergency while you are abroad:	
Name:     Relationship:	
Address:	
Number and Street	
City State/Province Zip/Postal Code Cou	ntry
Phone: Home ( ) Cell ( )	
Email:	
Your Occupation or Field of Study:	
Do you have any continuing health problems or physical limitations? If yes, describe:	
Have you any heateround and/or field experience in archaeology? If yes, briefly describe heley	
Have you any background and/or field experience in archaeology? If yes, briefly describe below Do you have any skills/training that you think might be useful to the field project (e.g. registered)	
nurse, CPR training, lifeguard, photography, Surveying, computer data processing, etc.)	u
Full Program (3 weeks) \$1950.00 Nights of May 27 – 14 June, departing 15 June.	
Additional nights \$100 each.	
Partial Program: 1, 2, or 3 Weeks – \$650 / week. Which weeks?	

## **Personal Information**:

Age:	Gender:	Date of Birth:				
Dietary Restrictions:						
Occupation:	Employer or School:					
Major field of study (if	a student):					
What languages do you	speak?					
SID:	F	Place of Birth:				
Country of Citizenship	:	Marital Status:				
Passport #:		Country of Issue:				
Date of Issue:		Expiration Date:				

Note: *If you do not have a valid passport*, please make application ASAP, and then provide the passport information requested above, at least two weeks prior to departure. *If you do have a valid passport*, please attach a copy of the information page. Passports must be valid for at least 6 months before entry date into Israel. No passports with an expiration date earlier than December 31, 2018 will be accepted for travel to Israel.

#### Academic Credit:

I am enrolling for academic credit at (check one):

\_\_\_\_\_ New Orleans Baptist Theological Seminary

\_\_\_\_\_ Through my university / seminary

I am registering for (check one):

\_\_\_\_\_ Graduate credits

\_\_\_\_\_ Undergraduate credits

#### **References:**

Please provide the names and contact information of two references (preferably academic): *Name of 1st Reference*:

Address:

Address.					
		Number and Street			
City	State/Province	Zip/Postal Code			Country
Contact Phone: (	)		Is this	Home or	Work?
Email:					
Name of 2nd Referen	ce:				
Address:					
		Number and Street			
City	State/Province	Zip/Postal Code			Country
Contact Phone: (	)		Is this	home or	work?
Email:	,				

## Payment:

I understand that I am required to complete and submit the medical, insurance, and conduct & behavior forms (either by mail or upon arrival to the excavation).

I understand that a deposit of \$500.00 is due by March 15; the balance of payment is due by April 25.

Each participant will be responsible for procuring their own Airline ticket for arrival at Ben Gurion Airport in Tel Aviv no later than Friday, May 25, 2018 (full season), and since we have a Jerusalem introductory tour scheduled for that Saturday the 26<sup>th</sup>. The Gezer staff will pick up all volunteers at the airport. Please forward a copy of your itinerary to <u>rdcole@nobts.edu</u> when you have purchased your airline ticket.

### Refunds:

In the event of cancellation of the project, participants will be granted a full refund of any payments made.

In the event of cancellation of participation by volunteers, the following refund policy will apply:

- 1) Cancellations effective before May 1 will receive full refund.
- 2) Cancellations effective more than a week before the beginning of planned participation will receive a refund of 50% of their payment.
- 3) Cancellations effective less than a week before the beginning of planned participation, or during participation, will not be refunded.

This refund policy is in effect since we plan and pay for various services according to preplanned contracts and agreements made with various entities. Thus, we must have sufficient prior notice of cancellations.

All cancellations must be done in writing (email is acceptable) and must receive a return answer before they are effective.

I understand and agree to the refund policy delineated above:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Return to: Dr. Dennis Cole, New Orleans Baptist Theological Seminary 3939 Gentilly Blvd. | New Orleans, LA 70126 (800) 662-8701 | (504) 282-4455, ext 3248