

**Application for Participation  
Yakima-Yamate (Japan) Student Exchange  
July 21 – August 5, 2017**



Name \_\_\_\_\_ Current Grade \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ High School \_\_\_\_\_

Email: \_\_\_\_\_

Parent Name(s) \_\_\_\_\_

1. Why do you want to go to Japan?

2. What do you hope to learn there?

3. Do you speak Japanese? \_\_\_\_\_ Yes \_\_\_\_\_ No

Other foreign languages? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list: \_\_\_\_\_

4. Do you have any health problems such as allergies, asthma, illnesses, or disabilities which chaperones should be made aware of? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please specify: \_\_\_\_\_

5. You will be required to participate in a program presented to host families during your stay. What talents do you have to offer (musical instrument, singing, drama, dance, sports)?

6. Please list your hobbies/interests (specific sports, computer skills, reading, etc.)

**APPLICATION AND \$200 DEPOSIT DUE NO LATER THAN  
FEBRUARY 6, 2017  
Extended to MARCH 13, 2017**



I recommend this student for participation in the Yakima-Yamate Student Exchange Program.

\_\_\_\_\_  
Date

\_\_\_\_\_  
**School Principal**



We, the undersigned, parent(s) or legal guardian(s) give our permission for our son / daughter,  
\_\_\_\_\_, to participate in the 2017 Yakima-Yamate Student Exchange  
Program trip to Japan.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Guardian

Completed forms and **an accompanying photograph** of student should be returned to the Davis or Eisenhower High School activities office or to:

Kirsten Fitterer  
Community & Public Relations Office  
Yakima School District  
104 North Fourth Avenue  
Yakima WA 98902