



# Children International Sponsor Visit Request

Account # \_\_\_\_\_

**Children International**

**All fields are Required.** Please complete and return this application **at least 8 weeks before** your requested visit date, by email to [CIAdventure@children.org](mailto:CIAdventure@children.org) or mail to Children International, Attn: Care Team, 2000 E. Red Bridge Rd., Kansas City, MO 64131. *\*Please be advised we cannot initiate the visit arrangements until your background check(s) has cleared and your visit donation and valid in-country phone number/lodging information have been provided.*

Full Legal Name \_\_\_\_\_ DOB mm \_\_\_\_\_If your **legal name is the same on the sponsorship account**, please check this box  Have you visited before? Y/N

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Cell \_\_\_\_\_ Home Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**If any, please list other visit participants:** (please attach a separate sheet if additional space is required)

Legal Name	Relationship	DOB	City & Country of Residence	Is this also a CI sponsor?
				Y/N Acct#
				Y/N Acct#
				Y/N Acct#

**Total visit participants** (including yourself, if applicable) \_\_\_\_\_ Will you be part of the visit? Y/N

Visitors 18 years or older on the day of the visit must have a completed a background check. *\*Please be advised that to ensure the safety and security of our children, unannounced visitors and individuals who haven't cleared their background checks beforehand will not be able to participate in the visit. Thank you for your understanding!*

**Emergency Contact Name:** (person not visiting) \_\_\_\_\_ Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

## Your Visit Date

**We will confirm the day available, based on your preference and the agencies visiting hours (see other side) and availability.**

**Please provide up to three possible visit days, in order of preference:**

(See other side for visiting hours)

- 1) Date \_\_\_\_\_ Start time of visit \_\_\_\_\_  
 2) Date \_\_\_\_\_ Start time of visit \_\_\_\_\_  
 3) Date \_\_\_\_\_ Start time of visit \_\_\_\_\_

**Information about the child(ren) you wish to visit:** (Please attach a separate sheet for additional children)

**We cannot accommodate visits to the children's homes due to safety and privacy considerations for our children and their families.** We take pride on upholding our accountability by implementing established guidelines that support our efforts, enabling us to fulfill our commitment to safeguard and respect the safety and privacy of everyone involved.

Are you fluent in the language your child(ren) speaks? Y/N**Child Name** \_\_\_\_\_ Child ID (if known) \_\_\_\_\_ City/Country \_\_\_\_\_I have visited this child before Y/N If **we have indicated your visit needs to last all day**, please check this box If we have **not** indicated your visit needs to last all day, how much time do you have?  1-3 hours  4-5 hoursIf time allows, please list your **activity preference** here: \_\_\_\_\_**Child Name** \_\_\_\_\_ Child ID (if known) \_\_\_\_\_ City/Country \_\_\_\_\_I have visited this child before Y/N If **we have indicated your visit needs to last all day**, please check this box If we have **not** indicated your visit needs to last all day, how much time do you have?  1-3 hours  4-5 hoursIf time allows, please list your **activity preference** here: \_\_\_\_\_

## In-Country Lodging and Contact Information of the country/city where your sponsored child lives

Please provide us with as much detail about your in-country lodging as possible. **You will need to arrange your transportation to the city where the agency/child is located at least one day before to your visit.** Please contact us if you need additional information. *\*If you will be staying in **multiple locations** or visiting children in different countries, please indicate your itinerary on a separate sheet of paper.*

Arrival date/time \_\_\_\_\_ at \_\_\_\_\_ Departure date/time \_\_\_\_\_ at \_\_\_\_\_

Airline/Cruise Line Name \_\_\_\_\_ Arrival flight/dock number \_\_\_\_\_

*\*Due to logistical complications, **your visit should not be planned for the same day as your arrival into and/or departure out of the country/city.** Our field staff suggests arriving at least one day before the visit.*

In-country lodging address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_

Is this a Hotel? Y/N Name of the Hotel \_\_\_\_\_

**Name exactly as it appears on the Reservation** \_\_\_\_\_

In-country contact number \_\_\_\_\_ Is this an **in-country** Cell? Y/N

**country code + city code + local number**

Are there any dietary, medical, or other special needs our staff should be aware of?

### Final Confirmation Email:

When the calendar marks **three weeks prior to your visit**, confirm your final details **directly with the office in the country** where your child lives. **This step is crucial to the success of your visit**, as it will allow our staff adequate time to contact the child's family and make the necessary arrangements for their transportation, child's school, parents' work schedule, etc.

**Your visit is subject to cancellation if the field staff does not receive your confirmation email.** We will provide you with their contact information after we receive your completed request form.

**LET THE COUNTDOWN BEGIN!!**

### I hereby acknowledge that I have read the contents of this form and understand the following: *(Please INITIAL each statement below)*

\_\_\_\_\_ I have **completed my background check(s) with ACS** and understand the results can take 5-7 business days.

\_\_\_\_\_ Children International **cannot initiate my visit arrangements until my background check(s) has cleared.**

\_\_\_\_\_ Children International **cannot initiate my visit arrangements without my visit donation and a valid in-country phone number** where I can be reached while I'm in the country of the visit.

\_\_\_\_\_ I should not plan my visit the same day as my arrival and/or departure from my child's country/city.

\_\_\_\_\_ I will have to provide my own transportation to the city where the agency/my child is located.

\_\_\_\_\_ I am responsible for all activity costs for my child (ren), family member(s) and CI staff members who must be present to host my visit, in addition to the visit donation paid prior to my visit.

\_\_\_\_\_ **If I do not email the field office to confirm and finalize my visit, it is subject to cancellation.**

\_\_\_\_\_ My donation is non-refundable if I cancel less than two weeks before my visit, and only a portion is refundable if I cancel 2-4 weeks before my visit. *\*Some exceptions may apply.*

\_\_\_\_\_ I may be required to wear a face mask and show proof of my vaccinations at some establishments.

\_\_\_\_\_ Depending on the COVID infection rate and health status of sponsored families and sponsors, agencies reserve the right to cancel a visit at any time.

\_\_\_\_\_ If I or someone traveling with me becomes ill, I must inform the field staff and CI Kansas City to cancel the visit on my behalf. If I show up ill for the visit, the visit may be cancelled, and my visit donation will not be refundable.

\_\_\_\_\_ I have informed CI Kansas City of all visitors and **understand unannounced visitors/individuals who haven't cleared their background checks** beforehand **will not be able to participate in the visit.**

### How would you like to cover the visit donation? *(Please initial one of the following options)*

\_\_\_\_\_ I will enclose a check/money order and send my visit request form via regular mail.

\_\_\_\_\_ I will call the **Care Team** to make my visit donation by phone as soon as I email my visit request form.

\_\_\_\_\_ I authorize the charge to my **AutoPay** information currently on file upon receipt of this visit form.\*

*\*For multiple cards/bank accounts on file, please indicate **the last 4 digits here** \_\_\_\_\_*

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Once your application is received, we'll work closely with you and our field staff to host a wonderful visit with your child!*

### Visiting Hours: *(Please note your visiting hours could vary depending on the logistics involved)*

Admin Office	Days/Hours	Admin Office	Days/Hours
Colombia, Barranquilla	M-F, 8:30am-4:00p	India, Sahay	visits not possible
Dominican Republic, Santo Domingo	M-F, 9:30am-4:00p	India, Delhi	visits not possible
Ecuador, Quito	T-F, 9:30am-3:30p	Mexico, Jalisco	M-F, 9:00am-3:00p
Ecuador, Guayaquil	M-F, 9:00am-4:00p	The Philippines, Bicol	Tue-Sat, 9:30am-3:30p
Guatemala, Guatemala City	M-F, 8:00am-3:30p*	The Philippines, Manila	Tue-Sat, 8:00am-5:00p
<i>*Rural Guatemala visits could start as early as 7:30am</i>			
Honduras, San Pedro Sula	M-F, 8:30am-3:00p*	Zambia, Lusaka	Mom-Thu, 9:00am-3:30p Fri, 9:00am-1:00p
<i>*Copan visits could start as early as 6:30am</i>			