



**APPLICATION FOR 2025  
WENATCHEE VALLEY MISAWA SISTER CITY  
ADULT AMBASSADOR**

**Please read this page carefully.**

Applications **MUST** be complete, and your check and a copy of your passport (or pending passport application) must be attached or your application will be returned. **Please fill in and print the application; no handwritten applications will be accepted. Application deadline is February 25, 2025.**

Adults selected as Ambassadors must be available in 2025 to travel with the Sister City delegation to Misawa, Japan, as ambassadors of goodwill.  
Expected dates are Sept. 26 – Oct. 5, 2025.

Selected adults must submit a current passport (or a copy of a pending application), a \$200 down payment (refundable if not selected), and \$25 membership dues. The cost of the 2025 trip is approximately \$2,600, which includes the airfare. The initial payment (for the airline ticket) is due by March 15, 2025, with the remainder due by June 1, 2025.

- Ambassadors must be current members of the Wenatchee Valley Misawa Sister City Association. Membership dues are \$25.00 per family.
- Selected Ambassadors will be expected to abide by a dress code throughout the trip. Red and blue shirts with the Sister City Association logo will be purchased by everyone and worn to most group events while on the trip.
- Ambassadors must be physically able to carry their own luggage on stairs and when boarding trains, subways, etc., throughout the trip, as well as **to walk up to five miles each day** while touring Tokyo and Misawa.
- Ambassadors should expect to encounter many cultural differences. In order to enjoy the trip, an attitude of fun, flexibility, and openness to new experiences is required. These experiences will include new foods, schedule changes, and other cultural differences. Expect an adventure, and you won't be disappointed!
- Ambassadors will be staying with a Japanese host family in Misawa. You will be eating some meals with your host family, and some meals with the delegation, as supplied by the Sister City Association. An attitude of gratitude and graciousness is expected at all times.
- Participants are **required** to attend 2 local Japan Orientation Evenings, to study basic Japanese phrases and learn about Japanese culture and etiquette.

Please sign:

**I have read and understand these requirements:** \_\_\_\_\_

# Adult Ambassador Application



- Attach a copy of your Passport (or pending application)
- Attach a current photograph of yourself
- Attach \$200 deposit, payable to WVMSCA
- Attach \$25 membership fee, if not already a member
- Application is due by **February 25, 2025**

Full Name (from Passport)	Nickname

Date of Birth	Family Members

Mailing Address

Home Phone	Cell Phone	Email Address

Emergency Phone	Name and Relationship

Occupation	Employer

Allergies	

Hobbies and Interests	

Group Affiliations and Community Activities	

Brief Introduction for Host Family	

Where Did You Hear About the Misawa Trip?	

Please list two (2) people who are familiar with your character as it relates to working with others. References will be checked when necessary.

Name	Telephone

Has it ever been necessary to restrict your activities for medical reasons, or do you have health concerns? (Japan has little or no handicap accommodations.) If yes, please explain.

<b>Any health concerns?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
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<b>Explanation</b>	
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Please answer the following questions.

<b>Do you use illegal drugs?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Have you ever been convicted of a criminal offense?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Have you ever been charged with child neglect or abuse?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Has your driver's license ever been suspended or revoked?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
<b>Other than above, is there any fact or circumstance involving you or your background that would call into question your being entrusted to represent the Wenatchee Valley as a Misawa Sister City delegate?</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>

The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me, or by conducting a criminal background check. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the Wenatchee Valley Misawa Sister City Association, its board members, or its volunteers. In submitting this application, I affirm that the information I have given on this form is true and accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please download, type (required), and return completed form by mail to:**

WVMSCA  
P.O. Box 5385  
Wenatchee, Washington 98807-5385

You may also deliver the completed application to the East Wenatchee City Hall. Applications must be postmarked or received no later than **February 25, 2025**. You will be notified by email of your selection after February 25, 2025. For any questions or additional information, please contact **LaVerne Bergstrom at (509) 669-2545**.

## Self-Introduction • 自己紹介

Name • 名前	
Gender • 性別	<input type="checkbox"/> Male (男) <input type="checkbox"/> Female (女)
Birthdate • 誕生日	
Address • 住所	
Phone Number • 電話番号	
Email Address • メールアドレス	
Occupation School Name and Grade 職業/学校名	
About Your Family (siblings, parents) 家族構成	
Allergies (animals, food, etc.) アレルギー	
Favorite Food 好きな食べ物	
Food Dislikes 苦手な食べ物	
Special Request for Homestay ホームステイの希望	
Hobbies • 趣味	
T-Shirt Size 服のサイズ (Tシャツ)	
Height • 身長	
Other • そのほか	