Finnish-Estonian Multidistrict

Rotary District 1420 Long Term Program, 2023-24

Host Club, District, & School Endorsements (Guarantee Form / Visa Supporting Document)

Full Legal Name as on passport or birth certificate (use uppercase for your FAMILY name; e.g., John David SMITH) Ciro UMEK						Date of Birth 2006 - 08 - 10			Sex Male	
				Country of Citizens		1				
Place of Birth La Plata, Argentina					Argentino		Country of Residence Argentina			
) HOST CLUE	AND DISTRICT GU	ARANTEE								
evel, invite the applicapplicapplicant's welfare. The	Rotary District specified within ant to participate in Rotary Clu ne host Rotary Club will also gi nd training for host families an	ib and District ev ive the applicant	vents and activ a monthly alle	vities typical of the ho wance as specified b	elow. The host	d provide guidance Rotary District ag	e and s	apervision to a	ssure the	
Host Country	Host Club Name Kanta-Espoo-Esbo Centrum							st Club ID#		
Host District Month	Arrival Airport in Host Country				Airport Code Arrival Date(s)					
1420	90.00 EUR		Helsinki, Finland (Vantaa)				HEL 06-Aug-2023			
ame of District Youth E		Name of Host Club President Heidi Kinnunen				Name of Host Club Youth Exchange Officer Heidi Kinnunen				
mail Address of District	Email Addres	Email Address of Host Club President heidi.kinnunen@kvs.fi				Email Address of Club Youth Exchange Officer heidiknen@gmail.com				
ignature of District You	Signature of Host Club President			s	Signature of Club Youth Exchange Officer					
with Do	Heid Keiser			1	this Kereir					
Date (e.g., 2021-01-25) Phone Number +3584 052 560 3 0		Date (e.g., 2021-01-25) 2023 - 04 - 21		Phone Number +358440999		Date (e.g., 2021-01-25 023 - 04		Phone Number +358440999405		
R) HOST CLUE	3 COUNSELOR									
Name	e Kangas			Email Address	. kang	gas@no	rdi	ica.f.		
Street Address Hauenka	25	25 Espoo			State/Province Postal Code Country 02170 Finlance					
Tome Phone Number	Business Phone	Business Phone Number			Mobile Phone Number + 358 400 690 480					
C) SCHOOLING	G GUARANTEE									
To be completed by the activities not a part of	ne school the applicant will atte the normal curriculum must be	end in host counti e paid by the app	ry) The applications or his h	ant will attend school er parents/guardians	from date of s	school start for on	e schoi	ol year. Costs o	f tuition and	
Name of School Kuninkaantie		Phone Number +358 50 5706			Number		Date School St	arts		
Street Address Kaivomest	ON KAZ		City Espoo			State/Province	Post	al Code	Country Finla	
Affix School Stage or O		Name and Title of School Official			Email Address Men. 17tsy					
* KUN O		Mega Estsy Porker			Theight	Email Address Men. 17ts;				
		Signature (in blue ink)				Date (e.g., 2021-01-25)				
THA A	ma				25th April 202					
D) FIRST HOST FAMILY Name of Host Parent #1			Email Address B			Business Phone Mobile Phone				
Päivi KORPIMäKI			paheikki@hotmail.com					+358505	+358505916581	
Name of Host Parent #2			Email Address tonkorpim@yahoo.com					Mobile Phone		
Toni KORPIMÄK	I		tonkorp	rmwyanoo.com		T	т	+358504		
Street Address Hämäläistenti		City Espoo			State/Province		al Code 780	Country		
Home Phone Number +3585059165	Names and Ages of any O	ther Adults (18 yea	irs of age or olde	er) in the Home						