

INTERNATIONAL POLICE ASSOCIATION
NEW ZEALAND SECTION

Notes of Guidance for completion of the International Travel Form

These notes are designed to assist in completing and using the Travel Form. It must be emphasised that there is no guarantee of any help from a Foreign Section and contact will not always be possible. **PLEASE READ CAREFULLY** before completing an application.

Approaches to overseas Sections for any kind of assistance relating to travel must be made using the official International Travel Form. International agreements have laid down that three months' notice is required in respect of group visits and one month for individual and family groups. However, it is recommended that the form be submitted at least three months prior to your departure from New Zealand. The more notice you can give, the more chance there is of something being arranged for you.

1. On completion of the International Travel Form, email or post it to:

The National Travel Secretary
15 Te Mete Terrace
New Plymouth
2. The Travel form **must** be accompanied by a photocopy of both sides of your membership card showing the yearly stickers. All questions must be answered and if not applicable, marked N/A.
3. A completed form is to be submitted to the Travel Secretary for each country where you require I.P.A. assistance. Always attach a full itinerary of your trip for each country, outlining your intended programme and places you require assistance.
4. If you are seeking accommodation, detail what type required, number of rooms, double or single, price range, number of nights and preferred location. If you are requesting home hosting, or to be met by IPA members, it is useful to indicate ages and interests on the form. If you have accommodation arranged, include name and full address and telephone number of the premises of your host if known.
5. When requesting sightseeing information, detail the estimated time available and what type of things are of interest to you, e.g. Police Stations, Historical Buildings, Museums etc.
6. If you wish to visit Police Departments, detail your interests, e.g. Fingerprints, Communications, Traffic, CIB etc.
7. Add any other information of your interests or hobbies which will assist the host Section to accommodate your requests and facilitate your meeting with other members who have similar interests.
8. IPA world wide is run by volunteers. The success of the Travel Form system depends solely on their willingness to assist. If for some reason your travel plans are changed or cancelled, let the Travel Secretary know immediately so that relevant persons can be advised in good time.
9. Finally, on your return contact the Travel Secretary and comment on your trip. The National Editor will be pleased to receive a copy of your experiences for publication in the IPA Magazine

INTERNATIONAL TRAVEL FORM



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TO:

Name: The National Travel Secretary
 Address: 15 Te Mete Terrace
New Plymouth

- National Secretary General
- Travel Secretary
- Social Secretary
- Regional Secretary
- Branch Secretary

1.	Name: Family Name: _____ First Name: _____		
2.	Address: (Give full private address) _____ _____ _____ E-Mail Address: _____		
3.	Age: _____	4.	IPA membership number (Attach copy of membership card or declaration at bottom of page must be completed)
5.	Police Force: _____	Department: _____	Position: _____
6.	Telephone Numbers: Home: _____	Work: _____	Mobile: _____
7.	Accompanying persons (give full name of accompanying persons and in case of children age). Continue of separate sheet		
	Name	Relationship	Children's age
	A. _____	_____	_____
	B. _____	_____	_____
	C. _____	_____	_____
8.	Destination: (A separate form in respect of each country (Section) to be visited). When visiting more than one place in any country please list each area. A. Country: _____ B: Town: _____		
9.	Method of Travel: <input type="checkbox"/> Air <input type="checkbox"/> Boat <input type="checkbox"/> Rail <input type="checkbox"/> Car		
10.	Flight Number: _____	Airline: _____	Other Means: _____
11.	Car Registration: _____		
12.	Date of Arrival: _____	Time: _____	Place of Arrival: _____
13.	Date of Departure: _____	Time: _____	Place of Departure: _____
14.	Accommodation Required: <input type="checkbox"/> Yes <input type="checkbox"/> No (a) If yes indicate type <input type="checkbox"/> Hotel <input type="checkbox"/> Guesthouse <input type="checkbox"/> IPA House		
	(If accommodation is required, provide sufficient information. If Hotel accommodation is required indicate number of rooms, type; single/double, with or without bath and shower and price limits (per person per night.) After the host Section has reserved hotel accommodation the applicant must confirm the booking direct with the hotel.)		
	Home Hosting: <input type="checkbox"/> Yes <input type="checkbox"/> No If Home Hosting: <input type="checkbox"/> Smoker <input type="checkbox"/> Non-smoker		
	(b) Number of nights _____ from _____ to _____		
	(c) Number of people _____ adults _____ children _____		
	If already arranged, name and address of host or hotel: _____		
15.	FACILITIES REQUIRED: (indicate specific interest, type of work (i.e fingerprint/traffic etc) and special sight seeing of historic buildings/museums etc.)		
	(a) Visit place of interest <input type="checkbox"/> Yes <input type="checkbox"/> No If yes specify: _____		
	(b) Other facilities: _____		
	(c) Languages spoken <input type="checkbox"/> French <input type="checkbox"/> English <input type="checkbox"/> German <input type="checkbox"/> Spanish Other, please specify) _____		
	Signed _____	Section _____	Date _____

FOR OFFICIAL USE

TO: Section _____ Name: _____

I certify that the applicant is an IPA Member. The request (as outlined) for assistance during the visit to your Section is forwarded for your attention. You may communicate with the applicant. May I thank you for your assistance.

Signed: _____ Position: _____ Date: _____