



## SYRIAN AMERICAN MEDICAL SOCIETY

DC Office  
1012 14<sup>th</sup> Street NW, Ste. 1475  
Washington, DC 20006

OH Office  
3660 Stutz Dr. Suite 100  
Canfield, OH 44406

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Dear Volunteer,

Thank you for your decision to join a SAMS medical mission. Below are the steps and procedures you need to follow before you travel:

The following forms are to be filled out and returned to **Yara Mowafy at [medicalmissions@sams-usa.net](mailto:medicalmissions@sams-usa.net)**

- 1- Medical mission agreement
- 2- Volunteer application form
- 3- DHS consent form to be shared with DHS (optional)

***Filling out the DHS form will facilitate your travel with minimal inconvenience.***

Once we receive your signed forms, we will issue a travel letter to carry with you.

Depending on the mission, you might be carrying some medical supplies and medications with you. Please make sure to let us know and include that in your medication/medical supplies form.

Lodging and airfare are the responsibility of the volunteer.

If you have any questions, please feel free to email Yara, or call our office at 866-809-9039 ext. 414.

Thank you,

SAMS Office