## **Application Form**

Name:			
Address:		<del> </del>	
City:			
Cell Phone	Email:		
Sex: Age:			
Previous mission experience:			
Why I feel called to this mission	on:		
Home church:			
Pastor of home church:			
References:			
If possible, please include a pr served in ministry. Other good worked with you on other proje	d references includ	•	•
1) Name: How you know each other:	Phone:	Email:	
2) Name: How you know each other:	Phone:	Email:	
(References may or may not b	e contacted, at the	e discretion of your trip orga	anizers.)
Dates of trip(s) I am interest	ed in:		
		Phone:	
Emergency contact Name: _			

missionaries. Also be sure to reply to the Facebook event invite for your trip-www.facebook.com/pages/Serving-Gods-Kids

**Email completed form to emspeltz@gmail.com** As soon as your application is approved you will be given the information to pay your deposit and begin fundraising for your trip.