

"Serve Saegertown"

-----Application-----

for 2012 Summer Missions Project

"Serving Saegertown · Building Relationships · Reaching Families"

Please Print NEATLY



Applicant's name: _____ Gender (please circle) M / F

Circle one: [I am a Group Leader] [I am part of group] with _____ (leader's name)

Contact Information

Address: _____ State & zip _____

Phone number(s) _____

Email: _____

T-shirt size (please circle one) *women's-* s, m, l, xl *men's-* s, m, l, xl

Sponsoring Church: _____

Pastor's Name: _____

Enclosed is _____ for my application fee.

Spouse/Parent(s), other (*circle one*) full name(s) _____

Address and phone number if different from above

Address: _____ State & zip _____

Phone number(s) _____

Medical Information

Insurance Carrier: _____ Policy Number: _____

Insurance Carrier's Phone: _____ Primary Care Physician: _____

Primary Care Physician's phone: _____

Current medications: _____

Date of last tetanus shot _____

Allergies (drug, bees, food, etc) or **ANY** special needs _____

My Church Involvement

Please describe your connection with your local church. How are you presently involved? What meetings do you typically attend? _____

Service Information

Please list below any and all, work and/or service skills and experience you have. For example, do you have any experience in painting, hanging or repairing sheet rock, electrical, nursing home ministry, helping in VBS, etc.

1) _____ 2) _____
3) _____ 4) _____

Release from Liability

I hereby release organizations associated with Serve Saegertown 2012, volunteers, staff and members of any and all boards of churches from liability for injury that I/my child may sustain during Serve Saegertown 2012 activities, work projects and recreation events. IN case of illness or injury, and in the event I am unable to respond, I authorize staff to allow emergency medical treatment or surgery by a licensed physician or hospital.

Print name clearly: _____

Signature: _____ Date: _____

Parent/Guardian (if under 18 yrs of age) _____ Date: _____

*** I authorize my child(ren) to be photographed for display on **Serve Saegertown 2012** website and Shutterfly site to be emailed to all applicants. Yes _____ No _____*

As Group Leader, I acknowledge I am over 21 years of age and possess a valid driver’s license. I have all my Criminal Background Check and Child Abuse clearances. Yes _____ No _____.

Group Leader Print name clearly: _____

Group Leader’s Signature: _____ Date: _____

**PLEASE SEND NO CHECKS OR APPLICATION FORMS UNTIL YOU CONTACT US FIRST.
Please call or email *Pastor Jeff*, to communicate your intent and
ask any questions regarding **Serve Saegertown 2012**.**

Remember to include:

- 1) This application form 2) Check for application fee 3) Pastor’s referral**

** After having contacted **Serve Saegertown 2012**, you may mail this with your application fee to:*
Christ E Free Church
ATTN: Serve Saegertown
PO 619
Saegertown Pa, 16433

** **DO NOT SEND CASH.** Make checks out to *Christ E Free Church of Saegertown* with memo: “*Serve Saegertown 2012*”*

** If you received this as a pdf file, you may request a Word doc format to fill out on your computer and return email with document attached.
Send your email to: *Christefca@juno.com*, subject: “*Serve Saegertown 2012*”*

