

Youth Mission '17 Application Form

Name _____ Age _____ Birth Date _____

Address _____ E-mail _____

City _____ State _____ Zip _____ Phone # _____

Parents Names _____

1. Why should you get to go on Youth Mission '17?
2. Why do you want to go on Youth Mission '17?
3. Are you a Christian? If so, when did you become a Christian?
4. What strengths do you have that will help our team?
5. What weaknesses do you have that might hinder our team?
6. Have you caused any problems on trips in the past? If so, how will you alleviate these problems?
7. Do you have any specialty experience?

Signatures:

I have read this packet and have prayerfully considered it. I desire to go on Youth Mission '17 and agree to abide by all of the rules set forth in this packet. I will seek Christ fully in this endeavor.

Student's Signature _____ Date _____

I have read the information in the packet and my child is ready to go on Youth Mission '16.

Parent's Signature _____ Date _____