

Work & Witness Trip 2007
5th & 6th Grade Application Form

Attach Photo Here

Please Print:

Name _____
Address _____
City _____ State ____ Zip _____
Grade ____ Phone (____) _____ - _____
Church Attend _____
Child e-mail _____ Parent e-mail _____

1. Testimony of your current relationship with Jesus Christ:

2. Why are you interested in going on this Work and Witness Trip?:

3. Do you speak a language other than English? Yes No
If so what language(s) _____

4. Activities in which you have participated – Check all that apply:

- _____ Attend Sunday School on a regular basis
- _____ Attend a worship service on a regular basis (Adult or Kid's)
- _____ Read my Bible Regularly
- _____ Play an Instrument What? _____
- _____ Involved in Ministry Opportunities in my Local Church
 - _____ Sing in Choir/Praise Team
 - _____ Puppet Ministry
 - _____ Quizzing
 - _____ Caravan
 - _____ Other Please List:

(Continue Other Side)

I give permission for my child to be considered for this Work and Witness Trip. If my child is selected for the trip, I give permission for pictures of my child to be used in Chicago Central District publications. I understand that if my child is not following the rules or is deliberately disobeying after repeated warnings, I will be contacted and will be responsible to pick up my child in Indiana.

Parent or Guardian Signature

Send this completed form to the following address by August 15, 2007:

Pastor Beth Bidle
200 University Ave.
Bourbonnais, IL 60915

Applicant's Signature

Children's Pastor/ Director or Pastor's Comments:

(Who knows the child well)

Child's Name _____

How long have you known the child? _____

How well do you know the child? _____

Is the child a regular attendee? _____

Child's Greatest Strength _____

Child's Greatest Weakness _____

Would you recommend this person's involvement in the children's work and witness trip weekend? Yes No

Why or why not? _____

Additional Comments: _____

Signature

Title

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