



Application Form 2012 Mission Trips St. Michael Lutheran Church



Participant's Full Name _____ Date of Birth _____ Grade 2011/12 _____
 Address _____ City _____ Zip _____
 Home Phone _____ Cell _____ E-mail _____
 Mother/Spouse's Name _____ Cell Phone _____ E-mail _____
 Father/Spouse's Name _____ Cell Phone _____ E-mail _____

Check checking below, I am applying to serve on one or both of the Mission Teams.

_____ FL-GA District Servant Event – Ocala _____ Intergenerational DR Mission Team
 June 24-30, 2012 June 2-9, 2012

Why do you want to serve on the Mission Team?

What experiences in your past has God used to prepare you directly or indirectly for this service? (i.e. leadership in various settings, VBS assistance, help in the kitchen, crafts, Bible knowledge, certain skills in construction, Spanish speaker, medical training, etc.)

- Yes, I would like to participate in the point system to raise funds for the trip
- No, I won't need to participate in the point system, but will pay for my trip by myself.

By signing this form, I am applying for a chance to be on a St. Michael Mission Team that will work to share the love of Christ in word and action. I understand that I am committing myself to a week of service and the preparation required beforehand (including raising the funds to go). In the event that my choice cannot be granted, I understand I will be contacted to talk more specifically about alternative choices. If a spot is not available on any trips, I will get my deposit back or be put on a waiting list.

Participant's Signature _____ Date _____

Parent's Signature (if youth) _____ Date _____

**PLEASE RETURN THIS FORM WITH A \$100 (DR) Nonrefundable or \$25 (Ocala) Nonrefundable
 CHECK MADE OUT TO ST. MICHAEL
 To Lori Schwan by Wednesday 16, 2011.**