

VOLUNTEER WORK WEEK REGISTRATION 2020

Name _____ Phone () - _____

Address _____ email address _____

City _____ State _____ Zip Code _____

Home Church _____

Arrival Date _____ Time of Arrival _____ Departure Date _____
(day and date) (day and date)

YOU MAY ARRIVE ON SUNDAY AFTERNOON

Meals: Beginning with _____, _____ Ending with _____, _____
(The first meal available is Monday breakfast, and the last meal available is Friday lunch)

Housing is on a first-come, first-served basis

Type of Room: Single _____ Double _____ Number staying in Room _____

1st Choice of Buildings _____ 2nd Choice of Buildings _____

Others staying in same room _____

Suggestions, Special Requirements _____

I will be bringing snacks for breaks _____ I would be willing to provide a 15 min devotion _____

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