

Application for Jamaica Christian Services USA, Inc. Work Trip Summer 2017

Name: _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Home Church _____

Beneficiary for Insurance purposes: _____

Email (please print clearly): _____

Passport Number: _____

Birth date: _____ T-Shirt Size: _____

Please list any special skills or abilities you have such as: teaching, preaching, music, drama, cooking, construction (specify), medical (specify) or any other.

Health Information List any medications or foods to which you are allergic _____

List medications taken on a regular basis

List any health problems

Blood type: _____

Name and address and phone number(s) of someone to be contacted in the event of an emergency.

THIS FORM MUST BE TURNED IN WITH DEPOSIT!!!

Please specify the weeks you are planning to go:

- Week 1, Mar. 10 to 18, 2017 Week 4, July 21-29, 2017
 Week 2, June 2-10, 2017 Week 5, July 28-Aug. 4, 2017
 Week 3, July 14-22, 2017

Please send this application with 50% of total trip expense as soon as possible (at least three months in advance). Upon receipt of your application and deposit you will receive more detailed information regarding your mission trip to Jamaica. If you have any questions Call Richard or Cassandra Geringswald: hm. 863-859-2984 or cell 863-602-5289

Send application and funds to:

Jamaica Christian Services, Inc.
c/o Mr. & Mrs. Richard J. Geringswald
5709 La Serena Ave.
Lakeland, FL 33809