

Missions Awareness South Africa

Application Form

Personal Details

First Name

Surname

Address

City

Province/State

Zip/Postal code

Country

Phone Numbers

Home

Work

Occupation

Email address

Date of Birth

Marital Status

Assembly Details

Name of your home assembly

Names of two of your elders

1) Name

Email address

2) Name

Email address

Spiritual Background

How did you get saved?

Do you attend your assembly regularly?

Have you spoken to your elders about wanting to come?

Would you be willing for us to contact one of your elders for a character reference?

What evangelistic work have you participated in during the past two years?

Emergency Contact Details & Legal stuff

Who do we contact in case of emergency?

Name

Address

Phone Number

Relationship to you?

Do you have travel insurance?

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. If accepted, I will respect the decisions and authority of Sid and Karen Halsband and the team leaders.

I will not hold Sid and Karen Halsband responsible for any accident, which may occur, or any ill effects, which may arise, as a result of my involvement in this short-term missions effort with them. My participation is at my own risk and Sid and Karen Halsband are not responsible for my welfare.

Name (printed)

Signature

Date