

TEAM APPLICATION

UMCOR SAGER BROWN MISSION JOURNEY

Mail to: P.O. Box 850, Baldwin, LA, 70514

Arrival Date Booked:	Date of Last Visit: Number of Times as Leader:				
Leader's Name:					
Address:					
Street	City	State	e Z	IP Code	
Daytime Phone:	Email Addres	ss:			
Evening Phone:	Fax:		_ Cell:		
Church Name:		Church Phone:			
Church Address:					
Street	City	State	ZIP		
Pastor's Name:					
Conference Name:			strict:		
(All correspondence will go to the le	ader's address unless othe	erwise noted.)			
A NONREFUNDABLE, NONTRANSF reservation. Processing fees are s Reservations cannot be confirmed, o TEAM SIZE: (TOTAL	separate from costs for r r space held, unless proces	neals and lodgir ssing fees accomp	ng arranged bany the applic	by the group leader. cation.	
Estimate the number of people who fee required (\$40 per person). The determine the number of additional	he estimated number for	your team is u	sed by UMC		
Dates Working at the Depot: Mon	ıday// th	rough Friday	_//	THE	
ENCLOSED APPLICATION FEE C	OVERS THE FOLLOWING	G PEOPLE:			
Adults: (18 years and older)	_ (Total Number) Male:	Fer	male:		
Youth: (ages 14-17) *	(Total Number) Male:	I	⁼ emale:		
Children: (ages 9-13) *	_ (Total Number) Male:		emale:		
* Two adults should accompany eve	ery three children (ages 9-13); c	or five youth (ages 1	4-17) for require	d child safety rules.	
TEAMS THAT INCLUDE PI	EOPLE UNDER THE AGE OF	F 18 MUST OBSER	RVE THESE G	UIDELINES:	
The child safety or Safe Sa	nctuary Policy for your chu	rch must be inclu	ded with this t	eam application.	
"Rule of Three" requires at least tw unescorted groups with	ro children with one adult at al nin "safe" areas. At least two a			, , ,	
Adult supervision requires at least fi not supervise youth over 1	ive years' age difference betwe 3 years old. Lead adults must b			•	
	s 9-13) require four adults; up n 10 people under 18 years old	• • •	, .		