

APPLICATION

Please print or type on the application using blue or black ink. Do not leave any blank lines or questions unanswered. If the question does not apply to you, fill in the blank with N/A and, if necessary, a brief reason why it doesn't apply. Ages 18-30.

Please have your parents or pastor review this application before submitting it.

Name:		FIRST	Λ	11DDLE		
Address:			ι.			
 City:		State:	Zip (Posta	al Code):		
UPCI District:	Pł	Phone: Home:		Cell:		
E-Mail Address:	Required in order for Youth Ministries	to send you information regard	Male	Female		
Date of Birth: Month:	Day: Year: Curre	ent Age: Have	you graduated fro	m High School? _	_YesNo	
Emergency Contact	Information:					
Name:	Add	Address:				
City:		State:				
Phone:	Cell Phone: _	_ Cell Phone:		Relationship:		
Christian Service H	istory					
Name of the church	/ou attend:					
Pastor:		Attended how long?				
Church Address:						
City:	State:	Zip (Postal C	code): P	hone:		
Have you received th	e Holy Ghost with the e	vidence of speaking	in other tongues?	Yes	No	

Have you been baptized in Jesus' name?YesNo			
Received the Holy Ghost: Date Place			
Was baptized: Date Place			
Contest Criteria			
In which church related activities have you been involved? (Check all th Youth Ministry,Hyphen,Preaching,Sund Bible Quizzing,Home Bible Studies,Evangelism Leaders,Musical Instrument:Other: List your district involvement (i.e., sectional youth rallies, youth convent	day School Teaching,Choir, n,Bus Ministry,Cell Group tion, camp)		
How much money did you personally raise for MTM this year? \$ Explain how you raised your offering and include details on how you us goal. (Feel free to attach a separate document if you need more room.)	ed creativity and hard effort to reach your		
Signature of Pastor	Date		
Signature of Applicant	Date		
For District Youth President Only			
pts Money Raised	pts District Involvement		
pts Church Involvement	pts Effort/Creativity		

*Important: In order for the applicant to be considered, this completed application must be returned to your District Youth President <u>one week after the MTM offering date</u>.



