

Wayside Student Leader Missions Application

Trip Date _____

Date of Birth _____

Male/Female (Circle one) Grade _____ School Attends _____

Last Name _____ First Name _____ MI _____

Father's Name _____ Mother's Name _____

Your Home Address _____

City _____ State _____ Zip _____

Home phone number _____ Work _____ Cell _____

Who should we contact in the event of an emergency? _____

Contact telephone number Daytime (____) ____ - _____ Evening (____) ____ - _____

Email address _____

T-Shirt size: small medium large x-large xx-large xxx-large (circle one)

Briefly describe your relationship with Jesus Christ

Please state why you would be a good leader

What skills and talents can you contribute?

Signature _____ Date _____

Parent Signature _____ Date _____