

WORK TEAM APPLICATION

Name (As Listed on Passport) _____

Passport Number _____

Name You Go By: (Nickname) _____

Address _____

Phone: Home _____ Work _____

Fax: _____ Email: _____

Age _____ Date of Birth _____ Marital Status _____

Relative Who May Be Contacted in the Case of an Emergency:

Name _____ Relation _____

Address _____

Home Phone _____ Work _____

General Condition of Health:

Existing Health Problems:

I have Health and Accident Insurance: Yes No

Policy Holder _____

Policy
Number _____

Home Congregation:

Name _____

Address _____

Phone _____

Contact Person _____

9/21/2005

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TEAM MEMBER INFORMATION SHEET

(Please complete and return with your Work Team Application)

Name _____

My preference is to work in the areas of _____.

Passport Number _____ Date of Birth _____

I have talent or skills in the following areas:

- | | |
|--|--|
| <input type="checkbox"/> Carpentry
<input type="checkbox"/> Electrical
<input type="checkbox"/> Yard Work
<input type="checkbox"/> Sanding/Finishing
<input type="checkbox"/> Moving Things
<input type="checkbox"/> Plumbing
<input type="checkbox"/> Song Leading
<input type="checkbox"/> Cooking
<input type="checkbox"/> Vehicle & Tractor Repair | <input type="checkbox"/> Organizing/Inventory
<input type="checkbox"/> Painting
<input type="checkbox"/> Gardening
<input type="checkbox"/> Odd Jobs
<input type="checkbox"/> Photography
<input type="checkbox"/> Devotionals
<input type="checkbox"/> Cleaning
<input type="checkbox"/> Computer/Appliance Repair
<input type="checkbox"/> Other _____ |
|--|--|

Special Talents, Skills and Interests:

My knowledge of Spanish:

___ None ___ A little ___ Some ___ Fluent

T-Shirt Size S M L XL XXL XXXL