Northern Michigan DeColores Ministries

Confidential Candidate Registration

The DeColores weekend is open to all who are 18 years of age or older. Married couples are strongly encouraged to attend consecutive DeColores Weekends. It is recommended, but not required, that the husband attend first.

Candidate Information: PLEASE PRINT CLEARLY AND RESPOND TO ALL QUESTIONS

Name _____Email: _____

Spelling of name for Name Tag (First and Last as you would like it on your name tag)_____

Address_____ City_____ State____ Zip_____

Home Phone (_____) _____-_____Work Phone (_____) _____-_____

Age ____ Birthdate _____/_____/_____ Male_____Female _____ Occupation_____

Marital Status: Single___Married___Widowed___Divorced___Separated___ If widowed, divorced or separated, how long? _____

Spouse's Name_____ Has your spouse sent in a registration form or attended a weekend? _____ WE#_____

Church _____ Are you baptized? Yes ____ No ____

Church and community organizations: _____

Do you have any food allergies? _____

Do you have any physical or health limitations/needs that might require our assistance on the DeColores weekend? Any allergies?

Yes ___No ___ If "Yes", please explain: _____

_____

Are there any emotional or personal stresses that you are presently resolving? Explain briefly: _____

_____

Please give a brief, frank idea of why you wish to attend a DeColores weekend: _____

_____

_____ _____

Applicant's Signature *Pastor's Signature (requested but not required)*

Upon completion of the top portion of the form, please return it to your sponsor.

>>>>***SPONSOR—PLEASE FILL OUT BOTTOM PORTION OF FORM COMPLETELY***<<<<<<<<<

1. What are your reasons for recommending this candidate? _____

_____

2. To your knowledge, does this candidate have any physical or emotional problems that would affect participation on a DeColores weekend of which we should be aware? Yes ___No ___ If yes, please explain: _____

_____

3. ESSENTIAL INFORMATION: Sponsor, please circle the qualities that best describe your candidate. (Complete A, B & C)

A. Shy *or* Outgoing **B. Quiet *or* Talkative** **C. Is a Leader *or* Is a Follower**

"I am familiar with the qualifications and responsibilities of a sponsor and I am prepared to accept these obligations."

Sponsor's Name_____ Email: _____

Address_____City_____ State _____ Zip_____

Home Phone (_____) _____ - _____ Work Phone (_____) _____ - _____ Date: ___/___/___

Mail completed application and $15 fee to

Checks payable to "Northern Michigan DeColores Ministries".

Tom Riedel (231) 499-3143

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Traverse City, MI 49684

FOR INTERNAL USE ONLY:

Date Rec'd ____/____/____ *Fee Paid* _____

1st Invitation ____/____/____ Response ____ Date ____/____/____

2nd Invitation ____/____/____ Response ____ Date ____/____/____

3rd Invitation ____/____/____ Response ____ Date____/____/____