MOUNTAIN TRAILS WALK TO EMMUAS – WORKER APPLICATION

**(Fill out a separate application for each walk you wish to work.)**

Request to work Walk#       Men  Women  Date

I can work the whole weekend  . I can only work  .

Church and City of this Walk

Name       Need a nametag Yes  No

Address       City       State       Zip Code

Phone #       Email

Church       Reunion group (day and time)

Are you a Musician?  no  yes What instrument(s)

Special Diet: Diabetic  Allergies:

Medical Needs (diabetic, drugs)

Physical Limitations

**Please check the areas in which you** **HAVE EXPERIENCE**

**Member Chair**

Agape   BALD  Lay Director

Decorations   Asst. BALD  Board Rep.

Kitchen   Photographer  Speaker

Love Team   Sacristan  Table Leader

ALD Team   Recorder  Asst. Table Leader

Clergy Team   Bkgrd. Music

**Please check the talks you have given and those you have backed up (BU)**

**Given BU Given BU**

Priorities   Discipleship

Priesthood of All Believers   Changing our World

Life in Piety   Body of Christ

Growth though Study   Perseverance

Christian Action   Fourth Day

Are you sponsoring someone this weekend? Yes  No  Name

**The cost for your weekend is $75 or $25 per day. Please include payment with your application if you are**

**sending it to the Team Selection Committee chair via snail mail. If you choose to send your application**

**electronically, then send your payment directly to the treasurer (see address below).**

**Mail application to Team Selection Chair: Treasurer:**

John Villani Tara Grunewald

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