

Eagle Pass Mission Trip Information/Interest Form

Name: _____

Phone: _____

Address: _____

Email: _____

Drivers License #: _____

Date of Birth: _____

T-shirt size: _____

Check one of the follow **(check one)**:

I am committed to going on this mission trip (If checked, please complete questions below.)

I am praying about it

I cannot go, but I want to help

Question to be completed only if going on mission trip:

Are you under 18? Yes or No **(circle)**

Do you have any types of allergies (e.g. food or drugs)? _____

Blood type: _____

What ministry team are you interested in serving on? **(circle)**

- **Construction** (Team Leader: Steve Grinnell)
- **Painting** (Team Leader: Raul Lozano)
- **Children's Activities** (Team Leaders: Delia Hauser & Tracy Zayasbazan)
- **Family Reading Fair** (Team Leader: Karmina Lozano)
- **Food Preparation and Serving** (Team Leaders: Sammy and Kay Richardson)
- **Preparation Team** (Team Leader: ?) (This team will be for those who cannot go on the mission trip, but want to serve in a supportive way here at home.)
- **Prayer Team** (Team Leader: ?)

Can you offer one of the following skills?

- Medical Care: _____
- Media: _____