

Sugarloaf United Methodist Church  
2009 Beyond the Walls  
Mission Team Application

**Please Print Clearly**

Mission Trip and Dates Applying \_\_\_\_\_

Full Name \_\_\_\_\_

Birthday \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ (c) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Previous Mission Experience \_\_\_\_\_

\_\_\_\_\_

Special Skill, Talents, Hobbies, Other Interests \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Affiliation with Sugarloaf UMC \_\_\_\_\_

Occupation \_\_\_\_\_ Do you play an instrument? \_\_\_\_\_

Date \_\_\_\_\_

Deposit \$ \_\_\_\_\_ Check # \_\_\_\_\_

**\*\*\*\*\*Anyone under 18 must be accompanied by a parent on the mission trip.\*\*\*\*\***

Revised 1/05/09