Presbytery of Lake Michigan
Worship and Study Mission Trip to Ghana, 15 June–1 July 2011
Trip Application (Due 14 March 2011)

Personal Data

Name (as it appears on your passport) _____

Address _____

City _____ State _____ Zip: _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-mail address _____

Hotel accommodations: double rooms _____ single rooms (possible surcharge) _____

Requested roommate for double rooms _____

Passport Information: *When available, send a copy of your passport picture page.*

Date of Issue _____ / _____ / _____ Expiration Date _____ / _____ / _____
Month Day Year Month Day Year

Place of issue _____ Passport Number _____

Birthplace _____ Birth Date _____ / _____ / _____
Month Day Year

Health Information

General health: Excellent ___Good ___ Fair ___ Do you smoke? Yes ___ No ___

Allergies? Yes ___ No ___ Special diet? Yes ___ No ___

Physical challenges? Yes ___ No ___ Emotional challenges? Yes ___ No ___

Problems handling heat? Yes ___ No ___ Under physician's care? Yes ___ No ___

If you have answered any question yes, please explain: _____

_____

Participants must receive all immunizations required for travel to Ghana before departing.

Signatures

I wish to participate in this tour. Enclosed is my deposit of $100 and I agree to pay the remaining $4,000 no later than 1 May 2011. Make checks payable to Presbytery of Lake Michigan and send to Presbytery of Lake Michigan, 1511 Helen Ave., Portage MI 49002.

Signed _____ Date _____

In case of a minor (under age 18), signature of parent _____