

# Taize Trip Application

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Do you have a passport valid through 2013? \_\_\_\_\_ Citizenship: \_\_\_\_\_

Physical Condition: Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Specify if under doctor's care: \_\_\_\_\_

Allergies/Medical needs: \_\_\_\_\_

\_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Local Church: \_\_\_\_\_

Pastor: \_\_\_\_\_

## **Application Questions:**

Please watch the 15 minute Life at Taize video on their website? [http://www.taize.fr/en\\_article4768.html](http://www.taize.fr/en_article4768.html)

What are your thoughts in response to the video?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



What are your strengths?

---

---

---

---

---

List previous international travel and types of activity:

---

---

---

---

---

Please tell us of any physical/health conditions the team leaders should be aware of that may affect the trip.

---

---

---

Do you hope to do personal travel before or after the trip? Explain.

---

---

---

---

---

If you are a minor (under the age of 18), please have your parent or legal guardian acknowledge their consent in allowing you to attend this trip.

---

Signature

---

Date