

TEAM BARNABAS RE-APPLICATION

Please check which events:

- | | |
|--|---|
| <input type="checkbox"/> Annual Enrichment | <input type="checkbox"/> Sons of Thunder |
| <input type="checkbox"/> Women's Camp | <input type="checkbox"/> Men's Roundup |
| <input type="checkbox"/> Growth Getaway | <input type="checkbox"/> Winter Youth Celebration |

Sponsored by CB Northwest
Church Next

Please complete and return to:

CB Northwest
Attn: Shirley Radford
1315 SE 20th Ave
Portland, OR 97214
shirleyr@cbnw.org

Date of Application: _____

First Name: _____ Last Name: _____ Middle initial: _____

Age: _____ Date of Birth: _____ Male: _____ Female: _____

Driver's License Number: _____ State: _____

CONTACT INFORMATION: We will be contacting you primarily by **email**. Please also provide the address and phone numbers we can contact you between now and the event.

Email Address: _____

Primary Phone: _____ Secondary Phone: _____

Address: _____
Street City State Zip

Please tell us one thing God is teaching you right now:

Where are you currently attending church?

List the email address of your church ministry leader / pastor: _____

If you are currently at school, please tell us the name and location of your home church:

In what ministries are you currently involved?

APPLICANT VERIFICATION AND RELEASE

- I recognize that CB Northwest, the organization to which this application is being submitted, is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.
- I authorize CB Northwest to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.
- I voluntarily release CB Northwest and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.
- I agree to abide by the policies and procedures of CB Northwest – both verbal and written – and to protect the health and safety of the children or youth at all times.

NAME (print): _____

SIGNED: _____ DATE: _____