

Second Annual
Head of School

Family

Mission Trip

March 2-6, 2019

APPLICATION

Family Name _____

Address _____

Cell Phone _____

Email _____

List Names and ages (children) of family members participating in this trip. Youngest child needs to be at least 4 (preferably 5 and older)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

List your skills: specifically carpentry, electrical, plumbing, changing oil in vehicles, hard-working , painting (no specific skills required besides hard-working ;-)

Do you have any tools you could bring to help with the above jobs? _____

Do you or family members have any health restrictions that would limit your work capabilities?

If yes please indicate: _____

Does your family have Health Insurance to cover you during this trip? _____

Has your family attended KAA Mission Trip before? When? _____

In case of an emergency, please list contact information:

Name _____ Relationship _____

Phone _____ Address _____

Please email back to mdavis@wcala.org