



Montana Women's Credo #4

April 23- 26, 2020

Team Application

Contact Information	
Name:	
Name you like to be called:	
Street Address:	
City, State, ZIP Code:	
Contact Telephone:	
E-Mail Address:	
Birth Date:	
Name of Church or small group you attend:	
Emergency Contact Person and Telephone:	

Special Needs	
Dietary/Allergies:	
Medical Condition(s):	
Physical Limitations (to be considered when making room or job assignments)	
<input type="checkbox"/> Smoker?	Special Accommodations Needed?
<input type="checkbox"/> Use a CPAP Machine?	Special Accommodations Needed?
<input type="checkbox"/> Snore?	Special Accommodations Needed?
Other Physical Requirements:	

The 3-Day Walk Experience	
Original Weekend (Date/Number):	
Previous Talk, Meditation and/or Job Positions:	
Previous Experience (Teaming/Weekend):	
Do you want to serve on the Montana CREDO team?	

Special Talents:	
The 3-Day Walk Experience (Continued)	
Life experiences that will be of benefit in serving others (team/weekend):	
How do you see yourself ministering and serving during this teaming experience?	
Anything else you would like to share about yourself?	

NOTE: Use of prescribed narcotics does not prohibit you from teaming. However, for security purposes, any prescribed narcotics will be secured in a lock-box on the CREDO weekend.

East to West CREDO requires a minimum "clean time" from chemical substances of six (6) months for teaming. Do you certify that you have at least six (6) months of "clean time" and that you will respectfully withdraw from teaming if you do not meet that requirement at any time up to date of the CREDO weekend.
 YES NO

If in recovery from substance/alcohol, please provide clean date: _____

By submitting this application, I am accepting God's call and making a commitment to attend all team meetings because I understand team meetings are vitally important to a God filled Credo retreat. I will, with God's help, be Christ's Hands in Action beginning with camp set-up on Thursday through clean-up on Sunday. I also agree to pay the team fee of \$200 before the start of the Credo retreat.

Signature: _____
 Date: _____

Mail Completed Application To:
 Montana Women's Credo
 146 Canyon View Drive
 Livingston, MT 59047