



KNOW



GROW



GO

PARTICIPANT APPLICATION - ADULT
PPC-Sponsored Short-Term Ministry Trip

Trip Destination: _____ **Date of Trip:** _____

Name: _____ **Date of Birth:** _____

Address: _____ **City:** _____

Phone Number (home): _____ **(cell):** _____

Email address: _____

Current Ministry Involvement at PPC: _____

Ministry Leader contact for Reference: _____

Have you previously participated in a short-term ministry trip? Yes No

Was it a PPC-sponsored trip? Yes No When? _____

Where? Trip Leader: _____

Applicant Signature

Date

Date Received: _____ **Reference:** _____ **Interview:** _____