SEARCH FOR CHRISTIAN MATURITY Team Member Application

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The goal of the Search Program has always been to maturity as they attend the church of their choice. The should complete the application below and bring it will make the church of their choice. The fee for a Team Member will be should	The key word here is "supwith you by the 4 th team; attend your church on a \$40.00 and is due to the I supplies are purchased, in members will be expected	oplement". Those who meeting. It must be sign regular basis and would rector no later than no refunds will be available to miss no greater that	wish to be Team Members ned by your Priest or d make a caring and sharing able if cancellation occurs		
be held at 1:30pm at St. John's Senior Center. The			Any		
absences from a meeting must be reported to the Remissed, the absences will be voted on by the Team Rector: Vice Rector:	Members for validity and _Phone Number:	permission to continue	f greater than 2 meetings are on the team.		
Boy Advisors:	Girl Advisors:				
Ryan Henry – (440) 539-3568					
Derrike Henry – (740) 350-5812					
Troy Kahrig – (614) 506-6842	Emily Schilling – (7				
Steve Roe – (740) 336-0944 Corey Schilling – (740) 509-2402	Lisa Polk – (740) 52	3-0/00			
**************************************	ELOW AND RETURN*:	********	*****		
The young adult below is making the application to of the group is "SEARCH for Christian Maturity". better person with a willingness to help others. The signature below will indicate that you recommend the your congregation/parish and attend church services.	Members of the Team his includes keeping Go his young person will be s/mass on a regular basis.	should exhibit attribute d in their daily lives ar a good Team Member, a	s of a person striving to be and be a true Christian. You and that they are a member of		
NameAddress	Phone	Birth Date _			
Email Address	City	state	zip Grade		
			Graue		
Church AttendingPriest/Minister Signature		Phone			
These winnster signature		1 none			
******************* PARENT'S PERMISSION: My child has permission to attend the Search we legally responsible for any personal actions taken by the a successors, and assigns, to hold harmless and defend St. J Steubenville, chaperons, or representatives associated w connection with any illness or injury or cost of medical directors and agents, and the Diocese of Steubenville, chaperons arising in connection therewith. PARENTS/GUARDIANS NAME	sekend at St. John's Church above named minor. I agree John Church and St. John So ith the event, arising from treatment in connection the aperons, or representative a	in Churchtown. As parent on behalf of myself, my chool, its officers, director or in connection with my rewith, and I agree to corssociated with the event for	t and/or legal guardian, I remain child named herein, or our heirs is and agents, and the Diocese of child attending the event or in impensate the parish, its officers		
PARENTS/GUARDIANS NAME PARENTS/GUARDIANS PHONE NUMBER PARENTS/GUARDIANS SIGNATURE					