"HIGHER GROUND"

Application for "Higher Ground Weekend"						
NAME	Male	Female	NAME ON BADGE			
STREET ADDRESS		CITY	STATE			
ZIP CODE	_ HOME PHONE #		_ WORK PHONE #			
MARITAL STATUS		NUMBER	R OF CHILDREN			
WEEKEND ATTENDINGOCCUPATION						
DO YOU HAVE FOOD	ALLERGIES?					
IF SO PLEASE SPECIFY	Y					
ARE THERE ANY PART	TICULAR PHYSICAL N	EEDS YOU HAV	E THAT MIGHT NEED SPECIAL			
ATTENTION?						
WHERE DO YOU CURI	RENTLY ATTEND CHU	RCH OR HAVE A	ATTENDED IN THE PAST:			
		SIGNATU	RE			
application. Please enc This will be applied to note: Request does not reservations can be acc Ground weekend, your	close a pre-registration your contribution of \$1 guarantee a reservatio epted for the next High reservation will be ma	deposit of \$30.00 50.00 which cov n. We regret that her Ground Week de for the next av	best possible by completing the above 0 made payable to "HIGHER GROUND". vers all expenses of the weekend. Please t because of limited space, not all requests for end. If you are not accepted for the next Higher vailable Higher Ground weekend. Please return ified as soon as possible of the dates of your			

"Higher Ground Weekend".

SPONSOR'S INFORMATION

NAME							
STREET ADDRESS	CITY	STATE	ZIP				
HOME PHONE #	WORK PI	HONE #					
E-MAIL ADDRESS							
NAME OF CHURCH NOW ATTENDING							
IS THERE ANY INFORMATION WE NEED TO BEST SERVE YOUR APPLICANT?							
MAIL THIS COMPLETED FORM AN	D \$30.00 DEPOSIT TO	:					

REGISTRAR, HIGHER GROUND, P.O. Box 62, Berryville, AR 72616