

**REGISTRATION  
Haiti Mission Trip  
January 7-15, 2018**

Name (as it appears on passport – usually your full name)

\_\_\_\_\_

Passport Number \_\_\_\_\_

Passport Date of Issue (XX/XX/XXXX) \_\_\_\_\_ Exp. Date \_\_\_\_\_

Birth date (XX/XX/XXXX) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

T-shirt Size \_\_\_\_\_

\_\_\_\_\_ Enclosed is my **\$250.00 non-refundable deposit** (Make checks payable to Lord of Life. Mail to the attention of Lisa M. Hellyer at 3105 W. 135th St. Leawood, KS 66224 or drop it in the box outside Lisa's office at church.)

\_\_\_\_\_ I am registering for the January 7-15, 2018 Mission Team.

**Projects include:** Children's Ministry (VBS), Medical Clinic (Health Professional), Men's and Women's Bible Studies, Medical Clinic (Support Staff), Eyeglass Clinic, Hands on Project (if there is one)

**Please indicate your top 3 choices of projects. Only list the projects you are interested in doing as you may not get your first choice. I consider the gifts of all the team members and where the best fit for each individual would be.**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**All registrations and deposits are due NO LATER than Sunday, September 24, 2017. Please be aware that spots may fill up, closing registration prior to the registration deadline.**