

Claremont UMC Registration for 2012 Alaska Service Trip

(please fill-out one form for each youth and adult)

Name: _____

Date of Birth: _____

Grade in Fall: _____

Street address / City / ST / Zip: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Mother's Name: _____

Work or Cell Number: _____

Father's Name: _____

Work or Cell Number: _____

Health Insurance Co: _____

Policy No. _____

Family Physician: _____

Phone: _____

I have special travel needs (dates/conditions): _____

I anticipate needing financial assistance for the trip _____

More information will be collected in the future. Church service trips are drug and alcohol free.
Please complete form and email to dan@claremontumc.org
or fax to 909-624-7308 or bring to the church office.

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