

**SOUTH CAROLINA DISTRICT
WORK AND WITNESS
2017**

**WAHIAWA
OAHU, HAWAII**

FEBRUARY 11 – 25, 2017

TOTAL COST: \$1600.00 PER PERSON

Applicant must be 18 years of age or be accompanied by parent or legal guardian

***** YOU MUST FILL IN ALL BLANKS *****

PLEASE FOLLOW INSTRUCTIONS CAREFULLY

Name: IMPORTANT (AS IT APPEARS ON YOUR PASSPORT) IMPORTANT

_____ Birth date: _____

Address: _____ City: _____ Zip: _____

All phone #s: _____

Age: _____

Passport number: _____ Place Issued: _____

Date of expiration: _____ (must be more than 6 mo. of trip return date)

Spouse's name: _____ Local church: _____

Member: Yes ___ No ___ Do you tithe regularly? Yes ___ No ___

Team shirt size: _____ Name you want on shirt: _____

Email address: _____

Name and contact # in case of emergency: _____

All applications must be turned in or postmarked by October 30, 2016

MAIL TO:

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