

# ***ACTS 2 - 2010***

## ***Sponsor Application***

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Name \_\_\_\_\_

Age \_\_\_\_\_ Phone \_\_\_\_\_

E-mail address - \_\_\_\_\_

Mailing address \_\_\_\_\_

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

Cell # \_\_\_\_\_ T-shirt Size \_\_\_\_\_

Briefly describe your current walk with Christ \_\_\_\_\_

\_\_\_\_\_

Why do you want to participate in the ACTS 2 program? \_\_\_\_\_

\_\_\_\_\_

Ever been on a Work & Witness Trip before? \_\_\_\_\_ If so, where'd you go & what'd you do? \_\_\_\_\_

Which Church of the Nazarene do you attend? (name & town)

\_\_\_\_\_

Which services do you attend on a weekly basis there?

Sunday Morning Worship \_\_\_\_\_ Sunday School \_\_\_\_\_

Sunday Evening Service \_\_\_\_\_ NYI / Wednesday Night \_\_\_\_\_

List current involvement with local NYI \_\_\_\_\_

List involvement with Kansas district NYI \_\_\_\_\_

Pastor / Youth Pastor's Recommendation & Comments

\_\_\_\_\_

\_\_\_\_\_

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Turn in application & \$50 deposit to your Pastor, Youth Pastor or NYI President.  
Checks should be made payable to: KNYI, PO Box 230, Newton, KS 67114  
Postmark by January 15, 2010