

CHRIST THE KING CATHOLIC CHURCH HONDURAS MISSION
2010 APPLICATION PART 1 of 4
"Missionaries of Jesus Christ"



I am applying for: **Satellite Mission March 20 – 24, 2010**
Summer Mission June 19 -27, 2010

Name _____ D.O.B. _____
(Name as it appears on passport)

Address _____

City _____ State _____ Zip _____

Phones: Home _____ Cell _____ Work _____

Pager _____ Fax _____ E-mail _____

Have you had Virtus "Protecting God's Children" Training? Yes / No
Required if over 18 years old. (see info other side) Date: _____

Do You Have a Current passport? _____ Years Gone On Mission _____

Occupation/School _____ Bilingual? Yes / No

Place of Employment or Year in School _____

Area of Interest/Work Location Desired _____

Roommate Request _____

Name of Spouse or Relative Applying _____

Catholic - Yes / No Church Attended _____

If not Catholic, what Religion? _____

Health History / Medications / Allergies - _____

Person to notify when you arrive in Honduras - Name _____

Relationship _____ Email: _____

T-Shirt Order - Missionaries purchase **at least 4** to wear in Honduras **SIZE** ____
Cost - \$5 each (Additional shirts may be ordered) **# to order:** _____

PLEASE COMPLETE AND RETURN WITH LIABILITY RELEASE AND CONDUCT POLICY TO:
SANDEE HASLAUER, MISSION DIRECTOR
HONDURAS MISSION 2009
4000 NORTH RODNEY PARHAM LITTLE ROCK, AR 72212
PHONE 501-951-1759 FAX 501-225-7169
www.ctkhondurasmission.com