

Servant Event Registration Form  
**The HARP Mission**  
810 Main St. ▪ Caldwell, OH 43724

Please print neatly \* Please provide one form for each participant

**Participant:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Birth date: \_\_\_\_\_ Gender: \_\_\_\_\_

Please check all that Apply:  Adult Participant  Pastor  Group Leader from Church  Youth

**Congregation Information:**

Name: **TRINITY LUTHERAN CHURCH**

Address: **38900 HARPER AVENUE**

City: **CLINTON TOWNSHIP** State **MICHIGAN** Zip: **48036**

Church Phone: **(586)463-2921 X104** Pastor's Name: **PASTOR GARY RICHARD**

Personal Profile:

Previous Servant Event Experience:

Specific abilities, experiences, or interests that may be helpful for this event:

Special Needs: (medical, dietary, etc.)

**Participant Promise:** I look forward to serving my Lord, Jesus Christ, through my participation in this Servant Event and I agree to behave in a Christian manner at all times.

**Publicity Release:** I give my permission to allow any pictures or videos taken during the Servant Event to be used in Publications and publicity for The H.A.R.P. Mission.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature if under age 18

\_\_\_\_\_  
Date

Please return to Gwen Richard or Chris Kapolka by leaving in the mailroom at church. Deadline is April 1, 2017