



Participant Information

Name: _____

Home Phone: _____ Cell Phone: _____

Text? Yes No

Email Address: _____

Children who will be involved that week:

Name

Age/Grade

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



Potential Opportunities

Please mark your top five choices for participation.

Projects

- Community Garden
- Extra Rows in Personal Gardens
- Garden Market
- Legislative Awareness
- Nursing Home Care
- Neighborhood Parties
- Creation Care
- Educational Community Workshops
- Homebound Adoption Program
- Soccer Tournament
- Block Parties
- Project Cleanup
- Backyard Bible Clubs
- Assistance Ministry
- Evangelism
- Meals for Emergency Personnel
- Construction
- Childcare at church for mission participants' preschoolers
- Leading children in mission activities/caring for mission participants' children

Label the areas in order of preference.

Areas

- White House
- Cross Plains
- Millersville
- Owl's Roost

Your suggestions to be considered as potential opportunities for ministry to local and surrounding communities: _____
