

Mason-Dixon Credo

Application to attend as a **CANDIDATE**

Applications and deposits **must** be received two weeks prior to the weekend. Mail application and deposit of **\$30** to:
Mason-Dixon Credo, Attn: Rector/Rectora
P.O. Box 474
Littlestown, PA 17340

Full Name: _____ Name you like to be called: _____

Address: _____

City, State & Zip: _____

Home Phone: _____ Daytime Phone: _____

E-mail: _____ Age: _____ Birthdate: _____ Shirt Size: _____

Emergency Contact Person: _____ Phone: _____

Please explain any problems or special needs:

Are your Medications time sensitive? (example: take at 10 am & 1 pm) Yes / No

(Explain times, but do not need to list specific meds): _____

Special Diet Needs/Food Allergies: _____

Mason-Dixon Credo is committed to ensuring the participation of all persons, regardless of physical challenges. In order to make proper arrangements we need information that would help us help you. Please check the appropriate boxes below.

- Hearing Impaired Interpretation: ASL Signed English Oral Interpretation None Needed
- CPAP Machine Mobility Physical Limitations Environmental Allergies Smoker

Any additional information about your Physical Requirements, Mobility, Assistive Devices or Environmental Allergies?

The purpose of the Credo weekend is to help those struggling with hurts, habits and hang-ups – or those impacted by someone else’s struggles – to recognize and to embrace the loving, healing power of Jesus Christ. Credo is open to anyone 17 yrs. and older. If you have experienced active addiction in your life, you need to be clean and sober when you come on the Weekend. **Additionally, by submitting this application, you acknowledge that Mason-Dixon Credo has a Zero Tolerance Policy regarding the possession and/or use of alcohol and/or illegal substances at any and all Mason-Dixon Credo events.**

The weekend is from 6:30 p.m. Thursday to 7 p.m. Sunday, and your full attendance is required.

Signature of Applicant

Date

Please submit an application with a **\$30** deposit payable to Mason-Dixon Credo. In addition to the deposit, there is currently a cost of approximately **\$85** for each individual to attend a weekend. However, there will be no additional funds needed from you. Your Weekend is being underwritten by individuals who have experienced the weekend and wish to share that experience with you.

Sponsor’s Name: _____ 3 Day Walk You Attended: _____

Sponsor’s Address & Phone: _____

Signature of Sponsor

Date

Deposit Rec’d: \$ _____ Check# _____ or Cash _____ Date: _____

