

# Philippines 2017 Returning Application

Name on Passport \_\_\_\_\_ Name you go by \_\_\_\_\_  
(First, Middle, Last)

Marital Status: S M D W Date of Birth \_\_\_\_\_  
(MM/DD/YY)

Mailing Address \_\_\_\_\_

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

Cell \_\_\_\_\_ Other Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_  
\*\*E-mail will be the primary form of communication used\*\*

School/Graduation Year \_\_\_\_\_  
(if currently in high school or college)

If in college, what is your major? \_\_\_\_\_

If not a student, what is your occupation? \_\_\_\_\_

If you are away at college, please provide your mailing address:

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ T-Shirt Size: S M L XL XXL  
(Summer Trip Only)

Church Currently Attending? \_\_\_\_\_

Is your passport current?  Yes\*  No If NO, have you reapplied yet?  Yes  No

\*\*\*Expiration date must extend 6 months beyond return date!

IF YOUR PASSPOT IS CURRENT, PLEASE SUBMIT A COPY WITH THIS APPLICATION

Passport #: \_\_\_\_\_ Expiration: \_\_\_\_\_ Delta SkyMiles #: \_\_\_\_\_

Which trip are you applying for?

- January 21 – February 5
- July 1 – July 16
- July 1 – July 22
- July 1 – August 6
- July 15 – August 6
- July 22 - August 6

Are you interested in visiting the orphanage?  Yes  No

(Requires an additional \$300; may not be an option for January)

What airport would you like to fly from?

1st Choice: \_\_\_\_\_  
2nd Choice: \_\_\_\_\_

What did you enjoy most about your last trip to the Philippines? \_\_\_\_\_

What are you currently doing to grow in your relationship with Christ? \_\_\_\_\_

It is our desire that all team members come to *serve* as Christ came to serve (Philippians 2:5-11). With this in mind, read the following pledge and sign below if you are willing to make this commitment.

I pledge to willingly submit to the authority of my team leaders, the Filipino staff, and others put in leadership positions. I understand that I am not entitled to a leadership position as a returning applicant. I commit to refrain from gossiping, to avoid complaining, and to respect the staff and opposite gender with my words, actions, attitude, and dress.

**(Please sign if you are willing to make this commitment)**

Please mail this **fully completed** application to the following address:  
Bob Tebow Evangelistic Association  
8834 Goodby's Executive Dr., Suite F  
Jacksonville, FL 32217

