

Teens Encounter Christ
TEAM MEMBER APPLICATION

Today's Date: _____



Name: _____ Date of Birth: _____

Address: _____

Phone: Home- (____) _____ Cell-(____) _____

E-Mail Address: _____

Teens Encounter Christ
Julie & Duane Krzyzek
1265 North 38th Road
Earlville, IL 60518

Year in School,if applicable: _____ School currently attending: _____

Are you, or have you been a member of the Catholic Church? _____

Current Church Affiliation: _____

Parish/Church: _____ Parish/Church Involvement: _____

Marital Status: (check one) ___ Married ___ Single ___ Divorced ___ Widowed ___ Remarried

What TEC did you make and where? _____

Why do you want to be on a team? _____

If selected, in what capacity do you wish to serve? (Circle One)

- | | | | | | |
|-------|----|---------|----------|----------|---------|
| Adult | -- | Speaker | Musician | | |
| Teen | -- | Speaker | Musician | Resource | Live-in |

If you are an adult who has never made a TEC, who recommended you for the team?

If you are a teen, would you be willing to give one of these talks? (Circle your choices)

- | | |
|--------|---------------------------------|
| Ideals | Change of Heart (Teen Metanoia) |
|--------|---------------------------------|

NOTE: This is a general form. If some of the questions do not apply to you, you need not answer them. In addition, the cost of the weekend is \$50 for candidates. This partially offsets the expenses for the weekend. We ask that you prayerfully consider making a donation of at least \$25 to offset the expenses for your participation in the weekend. (Do not send with application, financial stewardship will be collected at a team meeting.)

[Mail to above address]