

Team Roster/Mission Preference/Cell Phone/Transportation Form for adults only (make copies as needed)

Email to deepimpact@ncbaptist.org no later than 3 weeks before camp date

CHURCH NAME _____ LOCATION AND WEEK ATTENDING _____

Adult Leaders

Name	Age	1 st Mission Preference	2nd Mission Preference	Gender
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____

ALL ADULTS MUST SIGN UP AS TEAM LEADERS OR MOTIVATORS. Please indicate which "job" each adult will serve

ADULT CELL PHONE NUMBERS

For all adults coming to Deep Impact from your church please provide us with name and mobile phone number

<u>Name</u>	<u>Mobile Phone Number</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Adult Vehicle Drivers

Name	Type of vehicle	Number of passengers
_____	_____	_____
_____	_____	_____
_____	_____	_____