

MID CAROLINAS TRES DIAS WEEKEND APPLICATION

Date of Weekend: _____ to _____

IMPORTANT NOTE TO CANDIDATE & SPONSOR: before completing this application, please read the STATEMENT OF BELIEF on the reverse side. By signing this application, you acknowledge that you understand the MCTD Statement of Belief.

Candidate: please fill out the front of this application & sign at the bottom of the page

Sponsor: 1) complete and sign the reverse side; 2) check the application for completeness & signatures; 3) mail the completed application to the address on the back along with the Applicant's non-refundable \$10 application fee (make checks out to Mid Carolinas Tres Dias)

CANDIDATE—please print

Candidate's Name: _____ Birth Date: _____ / _____ / _____

Your name as you want it printed on your nametag: _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Home Phone: (_____) _____ Work: (_____) _____ Cell: (_____) _____

Occupation: _____ Employer: _____

Church: _____ Denomination: _____ Church Location: _____

Pastor's Name & Signature: _____ Date: _____

Please obtain the signature of your Pastor, indicating his/her knowledge that you are attending a Tres Dias Weekend. If your Pastor would like more information about Tres Dias, please contact the MCTD Weekend Committee Chairperson listed on the reverse side to have them arrange for someone to contact your Pastor. If you cannot obtain your Pastor's signature, please explain on a separate sheet of paper.

Has the cost to Mid Carolinas Tres Dias for each person attending the Weekend been explained to you by your sponsor? YES NO

Marital Status: _____ Spouse's Name: _____

Childrens' Ages: _____ Has Spouse attended a Tres Dias Weekend or similar?: Yes No

If "Yes", Where: _____ When: _____

If "No", is application currently being submitted at this time?: Yes No If "Yes", for what Weekend?: _____

It is the policy of Mid Carolinas Tres Dias that the husband attend a Weekend prior to his wife's Weekend. It is preferable that both applications be submitted at the same time. If there are special circumstances when one spouse wishes to attend and the other does not, the application along with written explanation will be given consideration.

Briefly list your leadership and/or participatory involvement in your church: _____

Briefly explain why you wish to attend this Weekend: _____

Are you on any medications which must be taken at specific times? Please explain: _____

Do you require any special medical, dietary or physical help on this Weekend? Yes No
If "Yes", please explain on a separate sheet of paper with your name on it and attach it to this application

Please check all appropriate description(s) of yourself:

Follower Leader

Quiet Outgoing

What musical talents do you have?

Play Guitar

Sing

Other: _____

CANDIDATE'S SIGNATURE: _____ **DATE:** _____

By signing this application, you acknowledge that you understand the MCTD Statement of Belief

Sponsor: 1) complete and sign this page; 2) check the entire application for completeness & signatures; 3) mail the completed application to the appropriate address below along with the Applicant's non-refundable \$10 application fee (make checks out to Mid Carolinas Tres Dias)

SPONSOR INFORMATION—please print clearly

Sponsor's Name: _____ Email: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Home Phone: (_____) _____ Work: (_____) _____ Cell: (_____) _____

Church: _____ Denomination: _____

Original Weekend Date & Location/Community: _____

Are you in a Reunion Group?: Yes No How often do you meet?: _____

If "No", please explain: _____

Have you explained to your Candidate the current cost per person to MCTD for attending the Weekend and made arrangements for a donation to cover the cost? YES NO

With God's help, as the Sponsor of this Candidate, I am prepared to:

- Bring my Candidate to the Weekend
- Give service support to his or her family during the Weekend
- Actively support the Weekend
- Take my Candidate home after the Weekend
- Assist my Candidate in joining a Reunion Group
- Invite my Candidate to Sequelas
- Follow up with my Candidate for at least 12 months

SPONSOR'S SIGNATURE: _____ **DATE:** _____

By signing this application, you acknowledge that you understand the MCTD Statement of Belief.

Mid Carolina Tres Dias STATEMENT OF BELIEF

In order to understand Mid Carolinas Tres Dias, you must understand what we believe. These beliefs explain our allegiance to the Savior, our dedication to the work of His Kingdom and our stand for absolute truth.

- A. We believe and profess our faith in one triune God, the Father, the Son and the Holy Spirit. (Matthew 28:19)
- B.. We believe and profess that Jesus Christ is the only Savior and is God in the flesh. (John 1:1, 3:16 and 14:6)
- C. We believe and profess that the Holy Spirit is God and is The Lord and Giver of Life. (Romans 8:11, Job 33:4)
- D. We believe and profess that the Holy Scriptures are the inspired and completely true Word of God. (II Timothy 3:16-17)
- E. We believe and profess that all have sinned and fallen short of the glory of God, that forgiveness of sins is received through confession and repentance, and that our sins are washed away through the blood of Jesus Christ. (Romans 3:23, Acts 2:38 & I John 1:9)
- F. We believe and profess that salvation is a gift of God's grace obtained through personal faith in Jesus Christ. (Ephesians 2:8)
- G. We believe and profess that the Body of Christ is to make every effort to keep the unity of the Spirit through the bond of peace until we all reach unity in the faith and in the knowledge of the Son of God. (Ephesians 4:3, 13)
- H. We believe and profess that God's unconditional love, as made manifest to us through Jesus Christ, is the primary witness by which people are renewed, edified and changed. (I Corinthians 13:8)
- I. We believe and profess that God has called us to live holy lives that will bring glory to His name. (Colossians 3:1-25)

Sponsor: Please MAIL or EMAIL this application (Including \$10 app fee) to:

Michelle Adams
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Mount Holly, NC 28120
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