

St. Andrew Presbyterian Church, New Tampa, Florida together with Presbyterian Church of Chatham Township, NJ

## **HAITI MISSION TRIP 2020 REGISTRATION**

**Wednesday, January 8 – Tuesday, January 14, 2020**

- Please return completed forms to St. Andrew Presbyterian Church New Tampa office:  
5340 Primrose Lake Circle, Tampa, FL 33647 ATT: Hank Belusa or to:  
Hank Belusa 17201 Broadoak Drive, Tampa, FL 33647
- **REGISTRATION DEADLINE: OCTOBER 6, 2019**
- Registration also required at: <http://www.foundationforpeace.org/get-involved/mission-trips/sign-up-for-a-trip/> Scroll down to the item that references the Presbyterian Church Chatham Township & St. Andrew January 2020 trip.
- Questions may be addressed to Hank Belusa at 813-632-2701, mobile 973-462-8623 or by e-mail to: [debbieandhank@msn.com](mailto:debbieandhank@msn.com)

### **All Participants:**

Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### **Young Adult Participants under 21 years of age on January 8, 2020**

Please give birthday and age as of January 8, 2020: \_\_\_\_\_ *Date of Birth* \_\_\_\_\_ *Age* \_\_\_\_\_

\_\_\_\_\_  
*Father's Name*

\_\_\_\_\_  
*Mother's Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Home Phone*

\_\_\_\_\_  
*Work Phone*

\_\_\_\_\_  
*Home Phone*

\_\_\_\_\_  
*Work Phone*

\_\_\_\_\_  
*E-mail Address*

\_\_\_\_\_  
*E-mail Address*

St. Andrew Presbyterian Church, Tampa Florida

## **MEDICAL FORM**

2020 Haiti Mission Trip to Ganthier, Haiti January 8<sup>th</sup> – January 14<sup>th</sup>, 2020

### **Health Information of Participant:**

Required: Date of last tetanus shot: \_\_\_\_\_

Recommended: Date of last Hepatitis A \_\_\_\_\_ & or B shot \_\_\_\_\_

Typhoid Fever Vaccine \_\_\_\_\_

Food or other Allergies: \_\_\_\_\_

Dietary Restrictions: \_\_\_\_\_

Special health problems: \_\_\_\_\_

Medications: \_\_\_\_\_

### **Emergency Contacts:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### **Registration Checklist:**

- Completed Registration & Medical Information
- A copy of participant's insurance card (front and back)
- A copy of valid Passport through at least July 14, 2020
- A non-refundable tax deductible check for \$560 payable to St. Andrew Presbyterian Church (memo: "2020 Haiti Mission Trip") to cover air fare.