Group Housing & Travel Information Form

Last Updated: June 2016

General Group Information Name of Group:______ Email (If affiliated with a church or organization): ______ Address (If affiliated with a church or organization): ______ Phone Number: (If affiliated with a church or organization): ()______ # of Women in Group: _______ # of Men in Group: _______ # of minors in group: _______ How many first time missionaries are traveling with you? _______ Names of Team Members: _______

Will your team be wearing matching T-shirts upon arrival to Honduras (Recommended): Yes____ No___

If so, please specify what they will look like (color, slogan, etc): _____

Does your group plan on completing or participating in a certain project? If so, please specify:

If your project is separate from those began by AMOR, please list the amount of funds you have brought for the project:_____

Please list any particular talent or skills among your group? (Translating, preaching, carpentry, drama/dance, teaching, etc):

Group Leader Information Group Leader: _____ Address: _____ Phone Number: ()_____ **Group Travel Information** Arrival Itinerary: Departure Itinerary: _____ Planned length of stay (please include dates if possible): By signing below as the team leader you are agreeing to have completed the team leader checklist, went over the A.M.O.R Handbook with your team, received the teams application to take with you to Honduras at your time of arrive Group Leaders Signature:_____ As a group member by siging below you are agreeing that you have filled out the application given to you by your team leader and you understand the A.M.O.R Handbook.

Please send a signed copy of this document to <u>darlenedakin1@yahoo.com</u> as soon as you have purchased your place tickets.