

# CFL SUMMIT: APPLICATION



## APPLICANT INFORMATION

Last Name:	First Name:	Gender: Male / Female (Circle one)
Date of Birth:	Home Phone:	Cell Phone:
E-mail Address:		
Current Address:		
City:	State:	ZIP Code:
Has registrant previously been a participant of "The Summit"? Yes / No (Circle one)		
T-Shirt Size: SM MED LG XLG (Circle one)		Grade completed before Summit:

## MUSICAL BACKGROUND

FOR THOSE WISING TO PARTICIPATE IN WORSHIP LEADERSHIP

Do you wish to be considered for the Summit Vocal Team?

What part do you sing? Soprano Alto Tenor Bass (Circle one)

Do you wish to be considered for the Summit Instrumental Team?

What instrument(s) do you play? \_\_\_\_\_

How many years have you played this/these instrument (s)? \_\_\_\_\_

Will you be able to transport this instrument to the Summit? \_\_\_\_\_

## MAIL APPLICATION TO:

Course for Life  
Box 7496  
Abilene, TX 79608