



Personal Information

Name: _____

Address: _____

City: _____ State: _____

Zip: _____

Home Phone: (____) _____

Cell Phone: (____) _____

Email: _____

Parent/Guardian Names _____

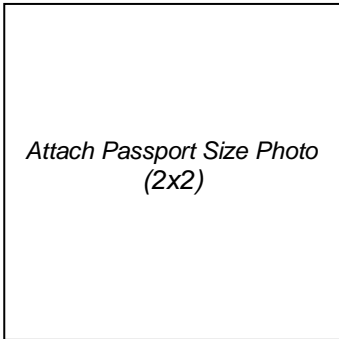
Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Birthdate: ___ / ___ / ___ Place of Birth: _____

Marital status: Single Married Divorced

Do you know another language other than English: _____ (which?) _____



Surge Program Interest

Please check below specific areas of interest that you would like to be involved in if accepted as an intern.

- USA Internship
 - School Assembly and Outreach Staff (February-May)
 - Summer Soccer Camp Staff (June-early August)
 - BOTH** School Assembly and Outreach Staff (February-to early August)
- Will you have a vehicle for transportation? **YES** **NO** **UNCERTAIN**
- Date Available to be in Salem _____
- Global Player Initiative Amateur (Summer Short term missions in Austria)
- Global Player Initiative Pro (10 month soccer/outreach internship in Austria)

Passport and Travel Information

Do you have a valid Passport? YES NO

Passport Number _____ Date Passport Expires ___/___/_____

Major Airport you would fly in and out from to join our projects?

(Airport Name/City/State)

Support Information – Financial and Prayer

Name of Church you attend: _____

Would your church be behind you in prayer if you are accepted? YES NO

Would your church be behind you in finances if you are accepted? YES NO

Are your parents behind you in this project? YES NO

Total Cost needed for the Internship Program you signed up for \$ _____

How much of the **Total Cost need for the Internship Program** are you able to guarantee through savings, family contributions, earnings, credit card, if you can't or decide not to raise support through other sources? \$ _____

Personal Testimony

Please share with us when and how you became a Christian and your thoughts on your current spiritual condition. *List any Bible Studies you currently attend, any recent missions or community service (include: soccer camps and clinics)...use back if necessary.*

Character References

Please give the name and address of references listed below. We may contact them for further information about you.

Pastor's Name: _____

Church Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Coach's Name: _____

School Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Employer's Name: _____

Place of Employment: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I have read the entire application and the above information is true and correct to the best of my knowledge

Signature

Date

MAIL APPLICATION TO ::

Surge International :: PO Box 2689 :: Salem, OR 97308

CONTACT INFORMATION For Dave Irby::

phone :: 503-930-1650

email :: dirby17@ymail.com

website :: www.cascadesurge.com

**All information obtained through this application will be kept in total confidentiality.