



WE'RE ALL GOD'S CHILDREN  
MOBILE MISSION TRIP  
REGISTRATION FORM

*"Committed to sharing God's gifts among all peoples of the world"*

**Yes! I want to travel with We're All God's Children to Zambia, Africa  
from August 6 - 21, 2022.**

<b>Initial Deposit Due w/App</b>	<b>2nd Installment Due 4/15/22</b>	<b>Final Payment Due 6/17/22</b>	<b>Trip Cost</b>
\$100.00	\$1500.00	\$1600.00	*\$3,200 per person

Send completed form with your check to: We're All God's Children, 525 Foxglove Ct, Myrtle Beach, SC 29579

- I am enclosing a deposit check in the amount of \$100.
- I am enclosing \$\_\_\_\_\_. (Minimum \$100)
- I am enclosing a check for the entire cost of the trip.

Please print clearly:

Name: \_\_\_\_\_  
*As it appears on your passport.*

Name: \_\_\_\_\_  
*As you would like it to appear on your nametag.*

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

I would like to serve in the  
capacity of: \_\_\_\_\_

I have the following credentials/  
certifications: \_\_\_\_\_

**Passport Information**

- I have:  applied for a passport  applied to renew my old passport.
- I have a valid passport that does not expire prior to 6 months after return.

Date(s) of COVID-19 Vaccine

Passport No. \_\_\_\_\_

Expiration Date: (dd/mm/yr) \_\_\_\_\_

Birth Date: (dd/mm/yr) \_\_\_\_\_

*Must have proof of vaccine to attend.*

***By signing this form I agree to pay all funds due to We're All God's Children by the Final Deadline.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*Subject to changes in airfare.