



JESUS Film Harvest Partners Partner Investment Trips Participant Registration Form

To register please submit the following:

- a) Submit this registration form to JFHP by either mail or fax.
- b) Pay the non-refundable \$250 deposit to JFHP.
- c) Mail or fax a copy of your passport (color copy preferred).
- d) Please email current head & shoulder digital photo of yourself (similar to a passport photo).
Email current photo to Darrell Leber at dleber@JFHP.org

Please print

Today's date: _____ Trip Name & Dates: _____

Name: _____
Last First M.I.

Informal name: _____

Gender: Male Female

Profession: _____

Street address: _____

City: _____

State: _____ Zip Code: _____

Home phone: _____

Work phone: _____

Cell phone: _____

E-mail address: _____

EMERGENCY CONTACT INFORMATION

(Someone not traveling with you)

Emergency contact name: _____

Relationship to you: _____

Home phone: _____

Work phone: _____

Cell phone: _____

TRIP ARRANGEMENTS

Hotel Preference:*

Double Occupancy Single Occupancy

*While we do our best to accommodate double occupancy requests, if we cannot find another roommate, you will be asked to pay the single rate.

Name of Roommate: _____

T-Shirt Size:

1. Adult: (check one) XS S M L
 XL XXL XXXL

2. Child: (check one) L

PASSPORT

Do you have a passport? Yes No Applying

Name on Passport: _____

Passport #: _____

Expiration date: _____
Month Day Year

Birth date: _____
Month Day Year

Other information that may be helpful in planning the trip (skills you have, special interests, talents, etc.)

We may use your photo or testimony for our publicity efforts.

- Check here if you do NOT want your photo or testimony used for this purpose.