



5730 Bruce Blvd, Noblesville IN 46062

www.fhlinternational.org (online registration available)

Noblesville/Fishers Area

FAITH, HOPE AND LOVE MISSION WEEK

2008 Registration Form

July 20-25, 2008

Pre-registration deadline is June 29, 2008 (Ensures T-Shirt Size)

First Name: _____ Last Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Cell Phone: _____ Work Phone: _____
 Email: _____ Speak Spanish: Yes ___ No ___
 Add to FHL mailing list: Yes ___ No ___ Prefer: Email ___ Mailed ___

Family Participants:

Spouse: _____ Child: _____ Age: ___
 Child: _____ Age: ___ Child: _____ Age: ___
 Child: _____ Age: ___ Child: _____ Age: ___

Skill Set: (for example: cleaning, carpentry, painting, bus driver, electric, plumbing, flooring, musical)

Other: _____

Yes___ No ___ Local Prayer Walk: Sunday, July 13, 4:00 p.m. Deer Creek Community Church, Noblesville

Yes___ No ___ Indianapolis Prayer Walk: Sunday, July 20, 3:00 p.m. Monument Circle, Indianapolis

Mission Days: 9:00 a.m. – 3:00 p.m. (Bring a sack lunch and see attached schedule for locations)
 Individual cost \$10.00 per day. Includes one T-Shirt only/not one per day – indicate size below.
 Maximum cost of \$50.00 per family. Family program only includes one T-Shirt – indicate size below.

Please indicate number of volunteers per day:		Additional T-Shirts (\$10.00 each)		Indicate Quantity:	
____ Monday	x \$10.00 = _____	Sm	_____	XXXL	_____
____ Tuesday	x \$10.00 = _____	Med	_____	Sm (Child)	_____
____ Wednesday	x \$10.00 = _____	Lg	_____	Med (Child)	_____
____ Thursday	x \$10.00 = _____	XL	_____	Lg (Child)	_____
____ Friday	x \$10.00 = _____	XXL	_____		
____ Total	Total _____	Total minus 1 free w/registration x \$10.00 =			

(Max. \$50.00 due)

Make check payable to White River Christian Church.

Grand Total: \$_____ (Mission day cost plus additional T-Shirts (1 included w/Mission Day Registration))

Date: _____ Waiver Signed: Yes____ No ____ Amount Paid \$_____ Cash: _____ or Check

#_____

White River Christian Church
1685 North 10th Street
Noblesville, IN 46060
317-773-2233 wrcc.org



WAIVER AND INDEMNITY:

By affixing my/our signature to this form, I and all family members signed up to volunteer agree to participate as a volunteer with Faith, Hope and Love, and hereby waive any and all claims by me/our heirs and estate against Faith, Hope and Love International Inc. and its directors, officers, staff and volunteers for any and all liability, damage or expense from any accident, illness or injury that may happen to me/us by reason of my/our participation as a volunteer of Faith, Hope and Love. This waiver is made knowingly and voluntarily without coercion of any kind.

I/we acknowledge and agree to indemnify and hold Faith, Hope and Love International, Inc. and its directors, officers, staff and volunteers harmless from and against any and all liabilities, damages and expenses including attorney fees arising from my/our volunteer activities with Faith, Hope and Love International Inc. including the enforcement of this Waiver and Indemnity Agreement.

Volunteer Signature: _____ Volunteer Signature: _____
Print Name: _____ Print Name: _____
Date: _____ Date: _____

If under 18 years old signature of custodial parent or legal guardian required. Is/are child(ren) age 18 or older?

If Yes _____ (Child(ren)'s initials)

If No – Guardian's signature is needed below.

The undersigned hereby acknowledges and affirms that they are the custodial parent or legal guardian of the under age 18 volunteer(s) named above, and does hereby consent to the child(ren) serving as a volunteer(s) of Faith, Hope and Love. The undersigned does hereby further agree to be bound by the terms of this Waiver and Indemnity Agreement.

Guardian Signature: _____
Print Name: _____
Date: _____