



Kairos Team Application

A Team Application is REQUIRED in order to be considered as a prospective Team member. **Filling out an Application does not guarantee a position on the Team.**

(You must be at least 18 years old. Please fill in all blanks)

A mandatory Team Formation period is required in preparation for each Kairos Weekend. Its primary purpose is to unify the Team in the Spirit of Christ. The Team Formation period is highly structured with a well-defined agenda. The Team learns about the prison environment and current rules of the prison. Specific tasks pertaining to the program are defined, explained, and assigned during the Team Formation. Kairos is a continuing ministry. Team service also includes participation in Kairos's continuing ministry - such as monthly meetings at the prison.

If accepted to serve on this team, I agree to attend the Team Formation meetings, to participate in the continuing ministry of Kairos, to abide by the rules and policies of Kairos and the prison, and to support in good faith the activities and spirit of Kairos.

| | | |
|--|---|---|
| First Name (for Name Tag) <input style="width:95%;" type="text"/> | First Name (on Driver's License) <input style="width:95%;" type="text"/> | Last Name (on Driver's License) <input style="width:95%;" type="text"/> |
| Home Address <input style="width:95%;" type="text"/> | | Safe Mailing Address (P.O. Box, Church, etc.) <input style="width:95%;" type="text"/> City, State, ZIP <input style="width:95%;" type="text"/> |
| City <input style="width:95%;" type="text"/> | State <input style="width:20%;" type="text"/> | |
| Home Phone (with Area Code) <input style="width:95%;" type="text"/> | Work Phone (with Area Code) <input style="width:95%;" type="text"/> | Cell Phone (with Area Code) <input style="width:95%;" type="text"/> |
| Email Address <input style="width:95%;" type="text"/> | | <input type="checkbox"/> Never Served on a Kairos Team <input type="checkbox"/> Lay? <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Clergy? <input type="checkbox"/> Dept of Corrections Trained? <input style="width:20%;" type="text"/> Mo/Yr Trained |
| Date of Birth <input style="width:20%;" type="text"/> | | |

| | | |
|--|---|--|
| <input type="checkbox"/> Attended Emmaus/Cursillo/etc? | Year Attended? <input style="width:20%;" type="text"/> | <input type="checkbox"/> Participate in Reunion Group? |
| <input type="checkbox"/> Ex-Offender? | Dept of Corrections No. <input style="width:20%;" type="text"/> | Year Released: <input style="width:20%;" type="text"/> |
| <input type="checkbox"/> Are you on a visitation list for any inmates in this prison? If so, name: _____ | | Currently on <input type="checkbox"/> role? |
| Relationship to you: _____ | Dept of Corrections No. _____ | |

I certify that the information provided on this application is complete and true to the best of my knowledge.

Your Signature: _____ **Date:** _____

| | |
|---------------------------|-------------------------|
| Church Name: _____ | Denomination: _____ |
| Pastor's Name: _____ | Church Telephone: _____ |
| Pastor's Signature: _____ | Date: _____ |