



South East Texas Tres Dias Candidate Application

Name _____ Male or Female _____ Preferred Name _____

Street _____ Suite or Apt _____

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

Email _____ Date of Birth _____ Age at weekend _____
(please include for each candidate)

Marital Status _____

If Married (Engaged) has spouse(fiancé) attended a Tres Dias or equivalent weekend? Yes No Submitted for wknd

If spouse attended a weekend, Where? _____ When? _____

Spouse's Name _____

Church Attending _____ City _____

Do you smoke? Yes No

Do you have any special needs? (ie wheelchair accessibility, chronic illness, special diet, food allergies, sleeping arrangements or medications) Yes No If yes, please describe:

Are you a Christian Yes No Member of the clergy? If yes, Ministry name _____

Sponsor: After careful thought & prayerful consideration, I commit myself to support this applicant BEFORE, DURING, & AFTER the weekend. I have reviewed the applicant information attached to this application, and verify that any known medical conditions or special requirements relating to food, sleeping, mobility or any other special accommodations or needs have been discussed with the candidate and disclosed on this form.

(Sponsors Name) (Sponsors signature) (weekend attended)

(sponsor email) (area code) (number)

Return completed forms to your sponsor with minimum \$25.00 deposit

TOTAL WEEKEND FEE: \$170.00 Due prior to the weekend. (Subtract Deposit If Applicable)
(Please makes checks to payable to South East Texas Tres Dias or SETTD)

Sponsor:

Mail application and \$25 deposit to: Mary Helen & Matt Wisenbaker at 21090 Blue Goose Drive, Montgomery, Texas 77316

For questions please call or email: Mary Helen: (713) 380-0313; Matt: (713) 816-3685; email: applications@settd.com

or maryhelenw@wisenbaker.com

THIS APPLICATION MUST BE COMPLETED IN FULL (2 PAGES) AND DEPOSIT RECEIVED BEFORE THE CANDIDATE WILL BE ADDED TO THE CANDIDATE LIST.



Release for South East Texas Tres Dias

I understand that South East Texas Tres Dias (“SETTD”) does not own the camp where my Tres Dias Weekend will take place, and has limited control over the facility. I therefore agree to release and indemnify SETTD to the same extent that I release and indemnify Sandy Creek Bible Camp for any and all injuries which I may receive while participating in the Weekend. I further and expressly release, indemnify and hold harmless SETTD, its officers and directors, and any volunteers participating in my Weekend from any and all claims for personal injury, death, or loss or destruction of property.

I further represent and warrant that I have disclosed in writing to SETTD, on the medical forms, each and every medical condition or issue I am aware of having which does or could require medications, special diets, sleeping accommodations, restrooms or other special considerations or facilities. I am not aware of any physical, mental or emotional limitations I have which would make it difficult for me participate in normal day-to-day activities.

If an emergency or necessary treatment situation arises, I hereby give permission to the first aid team selected by SETTD to order x-rays, routine tests, treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for me. I further, hereby give permission to the physician selected by SETTD to secure and administer treatment, including hospitalization, anesthesia, surgery, or any other medical decision. If for any reason I should deny such medical treatment as described here, I understand that my time on this SETTD Weekend has come to an end and arrangements will be made for me to be sent home.

Signature: _____

Date: _____

Printed Name: _____