

Via de Cristo of Ohio
Roster Update Information Sheet
Please Type or Print Legibly

Date: _____

Name _____

Weekend # _____ *(please note movement if other than VdC-OH)*

Street _____

City _____

State _____ Zip _____ Birth Year **(NOT DATE)** _____

Home phone (____) _____ Cell phone (____) _____

Email _____

Church Name & City _____

Additional Information:

Member of the Clergy: Yes No

If Yes, List Ordination Affiliation: _____

Musician: Yes No

Instrument(s): _____

Any Medical Training: Yes No

Type: _____

Are you interesting in serving on a Team? Yes No

Have you attended Weekend Orientation/Leader School? Yes No

*Please send all changes to Christine Brill, 3216 E Powell Rd, Lewis Center OH 43035
or email to goosebrill@msn.com, subject VdC-OH Roster Update*