



ReNew Hope Application January 22 - 26, 2017

Early Bird Discount Ends **Oct. 31** – Registration Deadline **Nov. 25**

Step 1 | Personal (Please print clearly and fill out completely.)

Name _____ Social Security Number _____
 Spouse (if married) _____ Driver's License Number _____
 Mailing Address _____ Driver's License State _____
 City, State, Zip _____ Date of Birth _____
 Home Phone _____ Race _____
 Cell Phone _____ Male _____ Female _____
 Home Church _____ How long have you been a believer? _____

First-Time Volunteer? Yes _____ No _____ *If yes, please provide references:*

Pastor _____ Phone or Email _____
 Reference _____ Phone or Email _____

History Have you been arrested within the last seven years? Yes _____ No _____

If yes, state date and charges _____
 If you served time in jail/prison in the last seven years, what institution(s)? _____
 Date of Release _____ Are you currently on parole or probation? _____

Step 2 | Location

Please mark "1" for first choice and "2" for second choice. Choices will be honored when possible based on the date your application was received, team size and other factors.



Atmore Area

- _____ Where Needed
- _____ Atmore WC (Men)
- _____ Century, FL (Men)
- _____ Fountain (Men)
- _____ Holman (Men)
- _____ J.O. Davis (Men)
- _____ Mobile WC (Men)
- _____ Mobile Metro Jail (Women)

Montgomery Area

- _____ Where Needed
- _____ Draper (Men)
- _____ Elmore (Men)
- _____ Frank Lee WR (Men)
- _____ Kilby (Men)
- _____ Red Eagle (Men)
- _____ Staton (Men)
- _____ Montgomery WR (Women)
- _____ Tutwiler (Women)
- _____ Tutwiler Annex (Women)

Athens Area

- _____ Limestone (Men)

Birmingham Area

- _____ Where Needed
- _____ Bibb (Men)
- _____ Donaldson / Hamilton (Men)
- _____ St. Clair (Men)
- _____ Birmingham WR (Women)
- _____ Lovelady Center (Women)

Troy Area

- _____ Where Needed
- _____ Bullock (Men)
- _____ Easterling (Men)
- _____ Ventress (Men)

Step 3 | Email (required)

Please give an email address where we can contact you: _____

Event confirmation, information, and updates will be sent to each volunteer via email.

(If this presents a problem, please call our office at 251-368-8818 to make special arrangements.)

Step 4 | Registration

Includes Sunday lunch, supper, and a share of event costs.

IMPORTANT: Applications will be processed when registration fee is received. Fee amount is determined by payment date.

Early Bird - Submitted by Oct. 31

- _____ \$150 Single or spouse not attending
- _____ \$100 Married with spouse attending

Standard - Submitted by Nov. 25

- _____ \$200 Single or spouse not attending
- _____ \$150 Married with spouse attending

Late - Must be received in office by Dec. 1

_____ \$250

Step 6 | Total

\$ _____ **Registration**
due with application

\$ _____ + **Lodging**
due by January 21

\$ _____ = **Total**

Step 5 | Lodging

_____ I WILL ARRANGE MY OWN LODGING.

For We Care to make arrangements, complete the section below. Includes breakfast provided by hotel.

Nights	Rates (per person / per night)
_____ Sat in Mtgy	_____ 1 in a room \$95
_____ Sun	_____ 2 in a room \$50
_____ Mon	_____ 3 in a room \$35
_____ Tues	_____ 4 in a room \$30
_____ Wed	(Option below for Atmore area only)
_____ Thur	_____ I am willing to stay in an area home or at We Care HQ at the rate of \$30/night. Includes breakfast and supper.

_____ **Nights** x \$ _____ **Rate** = \$ _____

Lodging Total

Requested Roommates: _____

(Please include full names of preferred roommates, including spouses.)

Step 7 | Payment

_____ **Check Enclosed** _____ **Credit Card**

Name on Card : _____

Card Number : _____

Exp. Date: _____ Charge Amount: _____

Cancellation Policy:

Registration fee is refundable, less \$50 admin costs, with cancellation notice by **January 1**. Lodging payment is fully refundable with cancellation notice by **January 20**.

Step 8 | Signature

Name (printed) _____ Signature _____

Note: In order for processing and clearance, all applications must be received by December 1.

Step 9 | Return to We Care Program (Mail, Email, or Fax)

3493 Highway 21, Atmore, AL 36502 • Email: ReNewHope@wecareprogram.org • Fax: 251-368-0932

For more information call 251-368-8818 or go to www.wecareprogram.org