

**Coptic Orthodox Evangelism Fellowship of North America Group**  
**“Rochester” Missionary Trip**  
**Rochester, NY, July 10<sup>th</sup> – July 14<sup>th</sup>**  
REGISTRATION FORM

**PLEASE PRINT CLEARLY:**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ M.I \_\_\_\_\_ Age: \_\_\_\_\_  
Name of Church: \_\_\_\_\_  
Name of Father of Confession: \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone:(\_\_\_\_) \_\_\_\_\_ cell:(\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_  
Emergency Contact Person: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone:(\_\_\_\_) \_\_\_\_\_ Alternative phone #:(\_\_\_\_) \_\_\_\_\_

**Traveling Information**

Arrival:     Date \_\_\_\_\_ Time \_\_\_\_\_ Flight # \_\_\_\_\_ City: \_\_\_\_\_  
              Date \_\_\_\_\_ Time \_\_\_\_\_ Flight # \_\_\_\_\_ City: \_\_\_\_\_  
              Date \_\_\_\_\_ Time \_\_\_\_\_ Flight # \_\_\_\_\_ City: \_\_\_\_\_  
Arrival to Mexico City: Flight # \_\_\_\_\_ Time \_\_\_\_\_

Departure:  Date \_\_\_\_\_ Time \_\_\_\_\_ Flight # \_\_\_\_\_ City: \_\_\_\_\_  
              Date \_\_\_\_\_ Time \_\_\_\_\_ Flight # \_\_\_\_\_ City: \_\_\_\_\_

- ❖ **Make sure that you read and sign the Mission Rules Form as well as the Consent Release Form**
- ❖ **Make sure you get the letter of ‘Agreement of the Spiritual Father’ signed and mailed**
- ❖ **Please complete and sign Registration Form. Write a check or Money order if coming from Canada \$80.00 USA, payable to: “Coptic Monastery of Saint Shenouda,” and For: Rochester Mission Trip**
- ❖ **Mail the following: the Registration Form, the Consent and Release Form, and the Agreement of the Spiritual Father before July 1 st, 2008 to:  
550 Lehigh Station Road, West Henrietta, NY 14586**
- ❖ **If you have any questions, please e-mail your questions to Rida Sadrack at [Rida.sadrack@skanska.com](mailto:Rida.sadrack@skanska.com)**
- ❖ **Emergency Contacts: Rida Sadrack (407) 466-6239**

Please sign at date:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date