



Preferred Date:.....

Arrival Date:.....

*Please type or print legibly*

Full Name.....

Preferred Name.....

Spouse's Full Name.....

Spouse's Preferred Name.....

E-Mail Address.....

Mailing Address

.....  
.....  
.....

Home Phone.....

Cell Phone.....

Mission Experience/Involvement.....

.....  
.....  
.....

Have you taken Perspectives on the World Christian Movement?.....

If so, when, where, and at what level?.....

Are you a PSP Coordinator?.....

What is your educational and career background?.....

.....  
.....  
.....



What special interests, talents, skills, or hobbies do you have?

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Please indicate briefly what you hope to gain from EXPLORE:

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.....

How can we be praying for you prior to your arrival for EXPLORE?

.....

.....

Will you be commuting or staying in the dorm? .....

Would you like to share a room with another attendee?  yes  no

Do you have someone in particular in mind? .....

List any dietary restrictions you may have: .....

Enclosed is \$..... Registration fee for a (circle one): single couple

If you have any questions, please contact the Personnel Assistant at (626) 398-2330 or [explore@uscwm.org](mailto:explore@uscwm.org)