



Kairos Outside Team Application

Name: _____

Name Preference for Name Tag: _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____

Email _____

Best Time/Place to Call: _____

Occupation: _____

Christian Demonination: _____

Made Kairos/Kairos Outside? Street Weekend: _____ Date: _____

Attended KO Leader Training: date _____ Location _____

Number of Kairos Outside Weekends Worked: _____

Team Assignments *(Please include all talks given – use back of page if necessary)*: _____

Do you play a musical instrument? _____ If so, what? _____

PLEASE NOTE: Kairos Outside team formations and Weekends are drug, alcohol, and fragrance free.

As a faithful member of a Kairos Outside Team:

1. I will obtain a current Kairos Outside Manual and will be familiar with my responsibilities as presented therein.
2. I will make every effort to attend **ALL** team meetings.
3. After becoming familiar with the program, as a Christian, I agree to support in good faith the activities done on the Weekend, as well as the theological and spiritual content of the talks, as outlined in the Kairos Outside manual.
4. I will abide by the rules of confidentiality as set forth in the Kairos Outside manual, **and understand that if I breach team formation or Weekend confidentiality, I will be dismissed from the team.**

SIGNITURE _____ DATE: _____

Mail completed application to:

**Kairos Outside of Ohio
PO Box 44
Pataskala, OH 43062**