Rio Texas Conference Disaster Response & Recovery Volunteer Work Team Information									
Team Ide	entificatio	on							
Confere	nce								
Team I e	Team Leader						No. in	Team	
								Juli	
Address									
City					State		1	Zip	
Phone N	lumbor								
rnone N	lamber								
E-Mail A	ddress								
Need Ac	comodat	ions: Y	or N	Mission	Location	:			
			-				_		
Dates of	Mission	Trip: A	rrive				Depart		
*Must inc	lude proof	of back	around che	ck and chi	ld safety f	raining for	r each tea	m men	ıber-
*Must include proof of background check and child safety training for each team member. Team Member Information									
					Safe Gatherings				
					Jait	e Gather	ings		Safety
	Name					e Gather	-		Safety Trained
	Name						-		-
	Name						-		
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	Name						-		-
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