

SOUTHERN CALIFORNIA CHRYSALIS COMMUNITY REQUEST FOR ANGEL APPLICATION

Chrysalis, c/o SDUM Church - 114 W 2nd Street, San Dimas, CA 91773 www.socalchrysalis.org

1. Please type or print leg	ibly:						
Name				Birthdate	e	_/	/
Address							
City	_ State	Zip		Home ()		
Email				Cell ()		
When/what was your 3 day	movement?						
Applying as a(n): adult (23+)	youth	n	Have you	angeled be	efore?		
When are you available to Saturday night s Saturday night k Saturday night k Sunday cleanup	server and Sur kitchen help a kitchen help	•	•				
If you are a Saturday night se or longer skirt, with no midrif Coats are optional. If your clo should bring a change of clo	f or straps show othes are not a _l	wing No low ppropriate, y	-cut tops. Fo you will be a	or guys, dres sked to be k	s shirt,	slacks a	and a tie.
Please be at the church no For Sunday help, you are in					appro	ximate	ely 11:30.
2. Required signature: (Pa	arent signatur	e reauired	if under 18)			
I agree to conduct myself in that I must abide by	a manner that i	is pleasing to	God and with	h an attitude c			
Signature of Applicant					_ Date	·	
reunion, and other Chrysalis act		has my/our p	permission to	attend the Ch	nrysalis v	veekend	d, the follow-up
					Date	<u> </u>	



5. Please scan* and email to:

chrysalissocal@gmail.com - Please make sure application has all required signatures.
*or email chrysalissocal@gmail.com for further instructions if unable to scan.