

RETURN APPLICATION As Soon As Possible
sue.tucceri@gmail.com
TEC Dates: SPRING / FALL
St. William's Teens Encounter Christ
Team Application



Name _____ Age _____

Address _____

City, State, Zip Code _____ Marital Status _____

Phone # (Home) _____ (Business) _____

School or College _____ Grade _____

Work (If not in school) _____

Are you a practicing Catholic? _____ Where?(Church) _____

1. How are you a practicing Catholic?

2. In what ways would you be able to help someone find Christ on this weekend?

3. How do you feel you are living a Christian Life?

4. Why do you wish to serve on TEC?

5. Which TEC weekends have you made and in what capacity did you serve?

Would you be able to attend the eight preparatory meetings before the weekend? Yes ___ No ___

Can you remain throughout the entire weekend? (Sat morning through Mon) Yes ___ No ___

Team members are required to sleep over Saturday and Sunday, and be available for the entire weekend.

By checking "yes" or "no" indicate which areas you are willing and able to serve

	Yes	No		Yes	No
Hoot	___	___	Wheat	___	___
Kitchen	___	___	Talk	___	___
Music	___	___	Table Leader	___	___

Why? Be explicit.

Please mail or bring this application to: Teens Encounter Christ, St. William's Parish,
1351 Main Street, Tewksbury, MA 01876, (978) 866-3506. Return application as soon as possible.