



## South East Texas Tres Dias Candidate Application

Name \_\_\_\_\_ Preferred Name \_\_\_\_\_

Street \_\_\_\_\_ Suite or Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age at weekend \_\_\_\_\_  
(PLEASE INCLUDE FOR EACH CANDIDATE)

Marital Status \_\_\_\_\_

If Married (Engaged) has spouse(fiancé) attended a Tres Dias or equivalent weekend?  Yes  No  Submitted for wknd

If spouse attended a weekend, Where? \_\_\_\_\_ When? \_\_\_\_\_

Spouse's Name \_\_\_\_\_  
(LAST) (FIRST) (MI)

Church Attending \_\_\_\_\_ City \_\_\_\_\_

Do you smoke?  Yes  No

**Do you have any special needs?** (ie wheelchair accessibility, chronic illness, special diet, food allergies, sleeping arrangements or medications)  Yes  No If yes, please describe:

\_\_\_\_\_

Are you a Christian  Yes  No Member of the clergy? If yes, Ministry name \_\_\_\_\_

**Sponsor:** After careful thought & prayerful consideration, I commit myself to support this applicant BEFORE, DURING, & AFTER the weekend. I have reviewed the applicant information attached to this application, and verify that any known medical conditions or special requirements relating to food, sleeping, mobility or any other special accommodations or needs have been discussed with the candidate and disclosed on this form.

\_\_\_\_\_  
(SPONSORS NAME) (SPONSORS SIGNATURE) (WEEKEND ATTENDED)

\_\_\_\_\_  
(SPONSOR EMAIL) (AREA CODE) (NUMBER)

Return completed forms to your sponsor with minimum \$25.00 deposit

**TOTAL WEEKEND FEE: \$150.00 Due prior to the weekend. (Subtract Deposit If Applicable)**  
**(Please makes checks to payable to South East Texas Tres Dias or SETTD)**

For questions regarding application, call Tracy & Denise Davis at 281-374-0143 or 281-684-1111

email: [applications@settd.com](mailto:applications@settd.com) or fax 832-482-3122

Sponsor: Please mail application to Tracy & Denise Davis 11430 Sugar Bowl Tomball, Texas 77375

Mailing to any other address may delay your application

**MUST HAVE FULLY COMPLETED APPLICATION (2 pages) WITH DEPOSIT IN ORDER TO BE PUT ON LIST**



# Application for South East Texas Tres Dias

## RELEASE

I understand that South East Texas Tres Dias ("SETTD") does not own the camp where my Tres Dias Weekend will take place, and has limited control over the facility. I therefore agree to release and indemnify SETTD to the same extent that I release and indemnify Sandy Creek Bible Camp for any and all injuries which I may receive while participating in the Weekend. I further and expressly release, indemnify and hold harmless SETTD, its officers and directors, and any volunteers participating in my Weekend from any and all claims for personal injury, death, or loss or destruction of property.

I further represent and warrant that I have disclosed in writing to SETTD, on this application, each and every medical condition or issue I am aware of having which does or could require medications, special diets, sleeping accommodations, restrooms or other special considerations or facilities. I am not aware of any physical, mental or emotional limitations I have which would make it difficult for me participate in normal day-to-day activities.

\_\_\_\_\_  
Candidate Signature

Printed name: \_\_\_\_\_

Date: \_\_\_\_\_