

APPLICATION TO ATTEND KAIROS

Kairos # _____

Name: _____ Number: _____

Date: _____

Name by which you wish to be called - NO NICKNAMES: _____

Housing: _____ Age: _____ Date of Birth: _____

Race: _____ Do you speak English?: _____

Presumptive Parole release date: _____

Do you have any dietary restrictions: _____

If so, what are they: _____

Have you ever attended a previous Kairos Event in another institution?: _____

I understand that I may not have visitors or participate in other activities during the time of this Weekend, and that I shall be released from other duties in the institution for the purpose of attending this Program at any time, but once I have left I may not return to this particular Weekend but may apply to attend a future Weekend.

I hereby (DO) or (DO NOT) give and grant permission to Kairos Prison Ministry International, Inc. and its authorized agents to use any photo in which I might appear, in so far as these pertain to Kairos, in any manner they may choose.

(Applicant's Signature)

CHAPLAIN'S COMMENTS: