

**Christ Church Liverpool**  
**Short Term Mission / Christian Camp**  
**Application for Support**

Name:			
Term Address:			
Home Address:			
Phone numbers: (home, term, mobile)			
E-mail:			
Name of Mission / Camp			
Mission / Camp Organisation			
Purpose of mission / Age range and type of camp			
Dates		Total Cost	£

How much of this cost do you propose to:	Fund yourself (eg from holiday work) £ Raise from friends / family / supporters £
Have you received short term mission support from Christ Church before?  If YES please give details.	

Please present this form in person to one of the elders or send to

Church Office  
 4 Rowen Court  
 Elmar Road  
 Aigburth  
 Liverpool  
 L17 0EJ