

HOPE³ Weekend Sponsor Application

Sponsor's Name		
Sponsor's Address		
City State	Zip	
Phone: Cell Home E-mail:		
Church (including city/state) you regularly attend		
Your Pastor's name and phone number		
Have you attended Sponsor training? Yes When No Sponsors must attend train can be accepted for a HOPE ³ weekend. Therefore, if you indicate "No," we will contact you to schedule a spon	ing before	e a participant ng session.
How do you know the applicant?		
How long have you known the applicant?		
Explain why you feel that this person would be a good candidate for a HOPE ³ weekend		
We will contact you in advance of the weekend to provide you with an opportunity to discuss any situation or co to share with the team to assist in the preparations for the weekend.	oncerns yo	ou would like
As the sponsor of this applicant, you are committing to a covenant of support for the secand after they have completed their HOPE ³ Weekend.	ed befor	e, during,
• Are you committed to be in prayer for the seed and his or her family throughout the Weekend?		No
• Are you able to provide transportation for your seed to and from the HOPE ³ Weekend?		No
 If the applicant is married, have you or will you discuss the HOPE³ Weekend with his or her spouse? Will you actively participate during the Weekend – Opening, Crosswalk, and Closing? 		No
 Will you see to or care for the needs of the spouse and the family of the applicant over the Weekend? 	Ves	No
 Have you explained your mentorship after the Weekend to the applicant? 		No
Will you commit to helping your seed find a community of faith and attend with him or her at least	105	110
once a month for the six months immediately following the Weekend?	Yes	No
 Have you received and read through the Sponsor of Seeds packet? 	Yes	No
• Have you reviewed the seed's form to ensure that the applicant's information is correct and legible?	Yes	No
• Do you know that the cost for the seed to attend the Weekend must be paid by their Sponsor prior to the seed arriving for the Weekend?	Yes	No
Sponsor's Printed Name / SIGNATURE	D	ate

Please make checks payable to HOPE³ Ministries Inc.

Please mail Participant Application and a Sponsor Application together to:

HOPE³ Ministries Inc. / P.O. Box 444 / Ruther Glen, VA 22546