**BILLET FORM**

Name: _____

Address:_____

Home Phone: _____ Work Phone:_____

E-mail:_____

Membership Status: □ Active Member □ Regular Attendee □ Other
Have you been a regular attendee at Wittenburg Baptist for at least six months?
Yes □ No □

How many beds (one per billet) can you provide? ____

Are you able to provide breakfast for each billet? Yes □ No □

Are you able to provide a bagged lunch for each billet? Yes □ No □

Are you able to provide the billet(s) with transportation to/from the church?
Yes □ No □

To assure everyone that our church is safe, we require all billets to get a Criminal Record Check done every three years. Please take a church letter to your local police detachment to get this done, and submit the result to the Pastor. This information will be kept confidential.
Has this procedure been completed for Wittenburg Baptist Church? Yes □ No □

List two people (unrelated to you) who have known you for at least two years, who may be contacted as a personal reference.

1. _____
Name Phone Number

_____
Street City Province Postal Code

2. _____
Name Phone Number

_____
Street City Province Postal Code

_____ _____
Billet's Signature Date