Name:		
Address		
Date of Birth	Phone	
Email address		
School	Grade Level	GPA
School Phone Number:		_
Parent/Guardian Names:		
Parent/Guardian Permission		<u> </u>
I give our daughter/son permission to enter th week-long trip should s/he win.	ne Okefenoke REMC Youth Tour o	contest and to participate in the
Sianature of Parent/Guardian		

Activities/Essay

On a separate TYPED sheet of paper, please list your involvement in school and/or other activities/membership organizations, any offices held, honors and recognitions you've received and volunteer hours you have completed.

Additionally, in a 500 word essay, please explain why you would like to be chosen to participate in the OREMC Youth Tour. Tell us about you and your goals, and how the Youth Tour experience would contribute to your future success.

Recommendations

Please include two letters of reference/recommendations with your application.

Application Deadline is January 20, 2025

Email completed application and attachments to youthprograms@oremc.com OR Mail to: OREMC Youth Tour, Okefenoke REMC, PO Box 602, Nahunta, GA 31553