

Volunteers In Mission
New York Annual Conference
Emergency Contact Information
Return to Team Leader

Missioner's name on passport _____ Passport number _____
Mailing address _____ Date of birth _____
Home phone _____ Work phone _____

IN CASE OF EMERGENCY, CONTACT THE FOLLOWING:

Name _____ Relationship to missionary _____
Address _____
City / State / Zip _____
Home phone _____ Work phone _____

IF UNABLE TO CONTACT THE ABOVE, CONTACT THE FOLLOWING:

Name _____ Relationship to missionary _____
Address _____
City / State / Zip _____
Home phone _____ Work phone _____

OTHER INFORMATION YOU WISH TO ADD IF AN EMERGENCY ARISES:

A copy of this form will be left with the local church in the event of an emergency.