

TWIN RIVERS BAPTIST ASSOCIATION

100 Twin Rivers Lane
Wright City, MO 63390

Phone: 636-745-9777
Fax: 636-745-9227
E-mail:
twinriversbaptist@centurytel.net

Twin Rivers Baptist Association Mission Scholarship Application

Please print or type all information and return to the Associational Office allow two weeks to be processed.

Name _____

Address _____
(No. or P.O. Box) (Street) (City) (Zip)

Phone _____
(Home) (Cell)

Email _____

Home Church _____ Pastor _____

Group going on Mission Trip _____

Leader of Group _____

Contact information for Group Leader _____

Destination _____ Date _____
(Depart) (Return)

Purpose of Mission Trip _____

Total Cost of Trip (breakdown) _____

Amount Requesting _____

Other Funds for Trip _____

Signature _____

Pastors Signature _____

To whom do we make check payable _____

Date Received

Check No.

Date Mailed