

Western Kentucky Tres Dias Application

Date: _____

Are you attending as: Married Pastor with spouse: _____ Married pastor without spouse: _____ Single
Pastor: _____ Married couple (both attending): _____ Single or widowed male or female: _____ Married (spouse
previously attended weekend): _____ spouse's weekend information _____ Married (spouse
NOT attending weekend): _____ reason not attending: _____

(Male) Last _____ First _____ Age _____

(Female) Last _____ First _____ Age _____

Address _____ City _____ State _____ Zip _____

Telephone (H) _____ (Cell) _____

Emergency Contact Name _____ Phone _____

T-shirt size _____ Special Needs _____

Church affiliation: _____ email _____

Please be reminded that the Weekend Facility is a smoke-free environment. _____ (Initials)

THERE IS A \$25 per-person FEE FOR THIS WEEKEND FOR THE CANDIDATE NOTE: Checks should be made to WKTD. Please check here for fee that is enclosed with application. Husband and wife use this same application form. Please sign and return this form to your sponsor.

Applicants Signature: Male _____

Female _____

----- **TO BE**

FILLED OUT BY SPONSOR: Sponsor's

Name _____

Address _____

City _____ State _____ Zip _____

Email: _____ Telephone _____

As a sponsor, I acknowledge my responsibilities to this candidate(s), as set forth by Western Kentucky Tres Dias (www.wktd.info). My candidate will require special attention on the weekend because:

Sponsor's Signature: _____

Send this application and \$25 fee to: WKTD P.O Box 182 Cadiz, KY 42211

Please be sure all information is complete. Unsigned and unpaid applications will be returned unhonored. Please remember that pastors and married couples are first priority on the weekend. Please contact the pre-weekend couple if you have questions of eligibility.