

Caribbean

Praise Orchestra Project GMP-187

REQUEST DATE:

April 26 – May 5, 2012



- Instrumental Expo (2)
- Instrumental Classes
- Church worship concerts

YOU CAN HELP US BRIDGE THE GAP!

Call **770.401.0782** or visit
www.GlobalMissionsProject.com
to reserve your spot today!

THE REQUEST FROM OUR MISSION PARTNER IN THE CARIBBEAN:



This is a multiracial society with a population of mainly Spanish and African origins. The largest organized religion is the Roman Catholic Church, but evangelical protestant denominations continue to grow rapidly. Afro-Cuban religions, a blend of native African religions and Roman Catholicism, are widely practiced.



COST

The cost of this Project is \$1,695 and includes ground transportation, accommodations, breakfast, insurance, Project Development and can be divided into easy, multiple payments. **Air transportation from Miami is included.**



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www.GlobalMissionsProject.com



GLOBAL MISSIONS PROJECT, INC.

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PARTICIPANT INTENT AGREEMENT

Effective Date: May 12, 2012

This Intent Agreement (“Agreement”) is made by and between Global Missions Project, Inc. ("GMP"), a Georgia Nonprofit Corporation tax-exempt under IRC Section 501(c)(3), and the following participant (“Participant”), for the **GMP187 Caribbean** mission project (the “Mission Project”)

Please Print FULL NAME

PROJECT: GMP187 – Caribbean; April 26 – May 5, 2012; 10 days, 9 nights

COST PER PARTICIPANT

Per person based on double occupancy:

Project Price Per Person	\$1,695
Single Room Supplement <i>(optional)</i>	\$400

By signing this agreement I understand that if approved for this project by GMP, a Cuban visa will be applied for on my behalf. A limited number of individuals (25) may be granted a visa to participate in this mission project. If I withdraw from this project, I will have eliminated a crucial role that cannot be filled by another individual as the visa will be in my name only and cannot be changed. If a visa is granted in my name, at that point the visa fee (to be determined) and application fee of \$300 will be due immediately. These fees are non-refundable and non-transferable.

This form must be returned within two weeks of the date listed above for consideration.

PARTICIPANT:

Signature

Printed Name

Date

VISA APPLICATION

Your full name/Nombre y apellido	
Your Father's Name/ Nombre y apellido de su padre	
Your Mother's MAIDEN Name/ Nombre y apellido de su madre	
Date of Birth/Fecha de nacimiento	
Place of Birth/Lugar de nacimiento	
Country of Citizenship/País de ciudadanía	
Current Address (include zip code)/Dirección actual	
Passport Number/Número de pasaporte	
Date of Expiration/Fecha de vencimiento	
Date Issued and Location/Fecha de emisión y origen	
Occupation/Ocupación	
Current Telephone Number/ Número telefónico actual	