



THE CAVE OF ADULLAM

INTERNSHIP PROGRAM

PERSONAL INFORMATION

Thank you for being interested in our Internship program.
To have a little better overview, we would like for you to fill out this application
and send it back via email to **adullamscave@gmail.com**
Thank you for your interest and help.

First Name

Last Name

Estimate Arrival Date

Intended Length
of Internship

Phone Number

Cell Phone Number

Email Adress

Home Adress

Country of Birth

Country of Citizenship

Emergency Contact

Emergency Phone number

Gender F M

Date of Birth

Children YES NO

Marital Status

If YES, Name/s

Date

Signature

Liability Disclaimer For Internship

The Cave of Adullam and/or Juan Carlos Sanchez does not provide liability insurance for the protection of individuals, groups, organizations, businesses, spectators, or others who may participate in the Internship Program. In consideration for your participation in said Internship Program, the individual, group, organization, business, spectator, or other, does hereby release and forever discharge The Cave of Adullam and/or Juan Carlos Sanchez and its officers, board, employees and family, jointly and severally from any and all actions, causes of actions, claims and demands for, upon or by reason of any damage, loss or injury, which hereafter may be sustained by participating in the Internship Program. This release extends and applies to, and also covers and includes, all unknown, unforeseen, unanticipated and unsuspected injuries, damages, loss and liability and the consequences thereof, as well as those now disclosed and known to exist. The provisions of any state, federal, local or territorial law or state providing substance that releases shall not extend to claims, demands, injuries, or damages which are known or unsuspected to exist at this time, to the person executing such release, are hereby expressly waived.

I hereby agree on behalf of my heirs, executors, administrators, and assigns, to indemnify the The Cave of Adullam and/or Juan Carlos Sanchez and its officers, board, employees and family, joint and severally from any and all actions, causes of actions, claims and demands for, upon or by reason of any damage, loss or injury, which hereafter may be sustained by participating in the Internship Program. It is further understood and agreed that said participation in the Internship Program is not to be construed as an admission of any liability and acceptance of assumption of responsibility by The Cave of Adullam and/or Juan Carlos Sanchez, its officers, board, employees and family, jointly and severally, for all damages and expenses for which the The Cave of Adullam and/or Juan Carlos Sanchez, its officers, board, employees and family, become liable as a result of any alleged act of the parade participant.

Name of Organization: **The Cave of Adullam and/ or Juan Carlos Sanchez**

Name of Individual Responsible (Print)

Phone Number Home Adress

Email Adress

Date Signature

All participants must complete this Liability Disclaimer to be eligible to participate in the Internship Program.

Return completed form with Entry Form to
adullamscave@gmail.com or Apartado 5, Barva de Heredia, Costa Rica, Central America 402001

WHATS ON YOUR MIND?

What are your Expectations for the three months, being with us?

Explain your personal relationship with God in a few sentences.

What are the areas, you would like to grow in your time being with us?

What are your personal strengths?

What are your personal personal weak points?
