



Relay Institute of Youth Evangelism

Application Form

Applications must be submitted by 30 September each year for programmes to be held in the following calendar year.

The..... Union would like to host a Relay Institute of Youth Evangelism in 20__ .

Country Details

Venue:

Proposed Dates:

Local Coordinator:

Programme Details *(Please check one option)*

We would like to have the full programme completed in 20__ (3 Core Courses and one elective)

We would like to hold a two week block in 20__ , and a further 2 week block in 20__ .

Budget Details

We are willing to participate in the budget sharing costs of the overall programme.

(Budget Formula as shown in the main Relay Document).

Signed:

Date:

Forms to be returned to: Trans-European Division
Youth Department
119 St Peter's Street
St Albans, Herts.
AL1 3EY
ENGLAND

E-mail: youth@ted.adventist.org