

NORTH CAROLINA KAIROS PCI # 17 CLOSING APPLICATION

"I was in prison and you visited me." Matthew 25:36

Location: Pasquotank Correctional Institution, Elizabeth City, NC

Date: **May 4, 2008**

Name: _____
(full name- exactly as printed on your driver's license)

Address: _____ City _____ State _____

Zip: _____ Phone: (home) _____ (work) _____

State / DL # _____ Expiration date _____

Date of birth: _____/_____/_____ Soc. Sec. #: _____-_____-_____

Sex: M____ F____ Race: W____ B____ H____ other_____

I attended : Cursillo/ Emmaus/ Via de Cristo/ Tres Dias/ Chrysalis/ Weekend # _____

Date attended: _____ Location _____

I will read and follow the "guidelines for prisons" that will be sent to me with your letter of acceptance. I understand that this application will be checked by the North Carolina Dept. of Corrections for outstanding warrants in N.C. and the U.S.

Your signature _____

E-mail address _____

This application is for Closing Service at Pasquotank CI , **May 4, 2008**

Mail to: Doug Spaeth
1904 Rivershore Road
Elizabeth City, NC 27909
(252) 335-0898

(As soon as possible, but **prior to April 1, 2008**)
Applications will be processed in the order received
and space is limited.

Note: You MUST be 18 years of age to be admitted as a guest at this facility.