



Please read and print the form below and return to ServantCARE, P.O. Box 151, Vance, South Carolina 29163 after you have signed, dated and had witness sign and date. If you send it to any other address on our site it won't get to us and won't count so please be conscious of correct address when sending. Thank you for your understanding!

Dear ServantCARE,

I _____ have read, understand, and agree to the legal information and release from as well as all material pertaining to the ministry of ServantCARE's, The Dwelling Place.

I agree to contact ServantCARE immediately if there are any changes in plans concerning a confirmed stay at The Dwelling Place so others may avail themselves of those dates.

The Dwelling Place is partially funded by the donations of those using our ministry services and we are able to provide these services because of the faithfulness of those using them.

Guest Name (Printed)

Guest Signature

Date

Witness Name (Printed)

Witness Signature

Date