

Susquehanna
Valley
Ministry
Center



ACTS Program Application

Name: _____

Address: _____

Email: _____

Phone Home: _____ Cell: _____

Member of the Church of the Brethren?

Yes No

Congregation: _____

District: _____

Ministerial Status (check each line that applies):

_____ Ordained minister, Church of the Brethren

_____ Licensed minister, Church of the Brethren

_____ Ordained minister, other denomination

_____ Prospective minister, not yet licensed

_____ Pastor of a congregation

Are you over the age of 18? Yes No

High School Education (check and complete as applicable):

_____ High School graduate (Year of graduation_____)

_____ GED Certification (Year received_____)

College Education (List any degrees you have earned):

Degree

Name of School

Date

Personal Reflection on Ministry: Write a brief statement (approximately 2 pages, double-spaced) on your call to ministry. Describe your experience of realizing you are called to ministry. Reflect on how you are answering your call, how you'd like to serve the church, and how training in the ACTS program will help you fulfill your call to ministry. Please send your essay with this form. **It should be turned in before you take your first ACTS class.**

Statement of Applicant: I hereby certify that the information contained on this ACTS application is complete and accurate, and affirm my desire to enter the ACTS program.

Signed

Date

Photo Release:

From time to time SVMC may take photographs, sound recordings, or videos of class sessions, events and certificate award ceremonies for both educational and promotional purposes. We wish to balance SVMC's need to educate about and promote our work with the right of our participants to privacy and respect. If you ever wish to have your name, or an image or recording of you to be withheld from use, we will do so when explicitly asked. We encourage you, however, to grant SVMC permission to use your name and to be photographed and recorded in all other instances. We therefore ask you to sign the following release.

Unless I explicitly forbid it in writing for a particular use or event,

I grant Susquehanna Valley Ministry Center the right and permission:

- *To copyright resulting media in SVMC's name or otherwise*
- *To use, publish, republish in whole or in part, individually or in conjunction with other media, in any form of media currently known or developed in the future,*

- To make such use for any purpose whatever, be it for education, illustration, promotion, art, advertising and trade, or any other purpose reasonably consistent with SVMC's mission, and
- To use my name in connection with the media if SVMC so chooses.

I hereby release and discharge Susquehanna Valley Ministry Center from any and all claims and demands arising out of or in connection with the use of these materials, including but not limited to claims for libel or slander or claims rooted in theories of right of privacy. This authorization and release shall extend to all legal representatives, heirs, licensees, assigns, or other successors in interest of the photographer/recorder, as well as the persons or entities for which the photographs or recordings were taken.

I am of legal age and have the right to contract in my own name. I have read the above statement and fully understand its contents. This release shall be binding on my legal representatives, heirs, and assigns. If any part of this document were subsequently to be ruled invalid, the balance of it shall nonetheless be regarded as enforceable.

Signed

Date

Though we ask you to consider granting permission so that we may communicate our work to those who support and could benefit from it, we understand that you may have legitimate reasons for refusing such permission altogether. Please indicate this by checking the appropriate boxes and signing below. As a courtesy, we ask that you remind any photographer or recorder of your wishes when you are aware that an event is being documented.

I refuse permission to SVMC to be photographed or recorded.

I refuse permission to SVMC to use my name in connection with its programs.

Signed

Date