



Staffing Application

October 15 - 18, 2020 • Perry, KS
Application Deadline: TBD

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

T-Shirt Size (Circle): _____ Phone (Cell): _____

Womens: XS S M L XL Phone (Home): _____

Mens: S M L XL 2XL 3XL Phone (Work): _____

Has a participant signed up for this H.E.R. Weekend due to your encouragement? YES NO

If so, which participant? _____

Has she indicated that she would like you to staff? YES NO

Are you applying to staff as part of a couple? If so, with whom? YES NO

Which Trainings have you completed?

- H.E.R. Weekend Date: ____/____/____
- MKP New Warrior Date: ____/____/____
- Woman Within Date: ____/____/____
- Mystic Warrior Date: ____/____/____
- Next Step Date: ____/____/____
- _____ Date: ____/____/____

Which trainings have you staffed? [Please include number of staffings]

What special talents, energies and/or passions, intentions, experiences do you bring to the H.E.R. Weekend?

Which processes/roles on the H.E.R. Weekend would you most like to participate in? [Please be specific]

The H.E.R. Weekend welcomes people of all physical abilities. We welcome who you are, and there is a place for you to serve on staff. Different roles on the weekend require different levels of physical activity. If you have any physical limitations, please list them here so we can assign suitable roles.

Do you have training in the field of Medicine or Psychotherapy? YES NO If so, please elaborate:

Email, fax or mail your completed form and payment to:

Email: staff@herweekend.net
Fax: 888-589-2497
H.E.R. Weekend
 P.O. Box 77
 Woodland Hills, CA 91365
Phone: 818-518-3850
www.herweekend.com

Staff are chosen based on the specific needs and requirements of our training and represent a balance of leadership. **Those who sponsor women to the H.E.R. Weekend are not guaranteed a staffing position.

- Eligibility:**
- Women who have completed the H.E.R. Weekend.
 - Men who have completed the MKP New Warrior Training Adventure.
- Requirements:**
- This form **must** be completed legibly and in its entirety.
 - A Staff Fee of **\$175.00** is due **3 weeks** prior to training.
 - The Staff Coordinator will distribute protocols approximately 3 weeks prior to training. Please learn/memorize your assigned process.

 [Signature] [Date]