



## APPLICATION:

Thank you for participating in *Toby's Top Dog* with NTXD! Please complete the application by typing or printing your responses using blue or black ink. Be sure to answer all questions – if a question doesn't apply, simply write "N/A."

– Please have your parent(s) and pastor review your application before submitting it –

## PERSONAL INFORMATION:

NAME: \_\_\_\_\_  
(First) (Middle) (Last)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP (Postal Code): \_\_\_\_\_

PHONE: \_\_\_\_\_ MALE: \_\_\_\_\_ FEMALE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ CURRENT AGE: \_\_\_\_\_

\* Have you already registered for Kids Camp? YES: \_\_\_\_\_ NO: \_\_\_\_\_

(if you marked **YES** please skip down and complete section titled: Contest Criteria & Rest of Application)

\* Do you plan to attend Kid's Camp this year? YES: \_\_\_\_\_ NO: \_\_\_\_\_

\* What size of T-Shirt: Youth - S: \_\_\_\_\_ M: \_\_\_\_\_ L: \_\_\_\_\_ or Adult - S: \_\_\_\_\_ M: \_\_\_\_\_ L: \_\_\_\_\_

\* PARENT/GUARDIAN NAMES: \_\_\_\_\_

\* PHONE: \_\_\_\_\_

\* PARENT/GUARDIAN NAMES: \_\_\_\_\_

\* PHONE: \_\_\_\_\_

**CHURCH INFORMATION:**

NAME OF CHURCH YOU ATTEND: \_\_\_\_\_

CITY: \_\_\_\_\_ PASTOR'S NAME: \_\_\_\_\_

CHURCH PHONE: \_\_\_\_\_

**CONTEST CRITERIA:**

\* How much did you personally contribute to fundraising for **Save Our Children** this year?  
\$ \_\_\_\_\_

**PLEASE CIRCLE ONE THAT APPLIES:**      **TOBY'S TOP DOG: \$1,000+**

**LEVEL THREE:** \$750+

**LEVEL TWO:** \$500+

**LEVEL ONE:** \$250+

\* Briefly explain how you raised your **Save Our Children offering**, highlighting the role of creativity and work. *(this is for recognition purpose only)*... Please Use Back Of Page If Need Be...

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIAL NOTE:**

- \* Photos of all *Toby's Top Dog winners* may be taken and used for promotional purposes on Children's Ministries social media, as well as on NTXD or UPCI Organizational platforms.
- \* Please include a clear, high-quality photo with your application or send one separately.

\_\_\_\_\_  
SIGNATURE OF PARENT(S) / GUARDIAN & DATE:

\_\_\_\_\_  
SIGNATURE OF APPLICANT & DATE:

\_\_\_\_\_  
SIGNATURE OF PASTOR & DATE:

**\*\*\* THIS APPLICATION MUST BE RECEIVED NO LATER THAN JUNE 1 \*\*\***

Please Mail or Email to:  
North Texas District Children's Ministries  
Attn: Toby's Top Dog  
PO Box 1931  
Greenville, Texas 75403  
director@ntxchildrensministries.com