

INTERNATIONAL PEACEMAKER INFORMATION FORM

Name: VINITA EUSEBIUS
First Middle Last (Family)

Primary Mailing Address: Secondary Mailing Address:

C/o Dr. LALIT C. T. EUSEBIUS

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ALLAHABAD- 211002

INDIA

Home Telephone: 011-91-532-264-2002 Work Telephone: 011-91-532-241-3874

Cell Phone: 011-91-941-563-1074 Fax: 011-91-532-241-3874

Email: veusebius@gmail.com

Website address of your home church, denomination, or sponsoring organization:
www.cnisynod.org

In case of an emergency, please contact: DR. LALIT C. T. EUSEBIUS

Telephone: 011-91-941-526-2164 Relationship: HUSBAND

The following information is needed so that we can promptly arrange for the payment of your honorarium, as well as secure health insurance (if needed) and inform hosts of special needs:

Do you have any health problems (diabetes, asthma, allergies, etc.)? Yes No

If yes, please explain: _____

Do you have any special dietary requirements (vegetarian, etc.)? Yes No

If yes, please explain: _____

Do you smoke? Yes No Do you drink alcohol? Yes No

Please list any other cultural or religious practices or personal needs that you wish your hosts to be aware of:

NONE
