



## Assistance Program Policies and Application

The Exodus Assistance Program is designed to provide financial assistance to those who may otherwise be unable to attend the Annual Freedom Conference. The amount of assistance available varies each year and depends upon charitable givers.

*If you wish to give financially to our assistance program, please call the Exodus office at 888-264-0877 or visit the conference website at [www.exodusfreedom.org](http://www.exodusfreedom.org) for more information.*

**If you wish to apply for financial assistance, you must complete the following steps:**

1. Please carefully read the Financial Assistance Program Policies.
2. Fill out and return the application to the Exodus office via fax @ 407-599-0011 or postal mail @ Exodus International, c/o Conference Department, PO Box 540119, Orlando, FL 32854 no later than **June 7, 2010**.
3. Briefly answer the following questions and include your answers in your application.
  1. Why do you wish to attend an Exodus Freedom Conference?
  2. Why are you are seeking financial assistance?

### Financial Assistance Program Policies

- Exodus will provide **partial** financial assistance for the Exodus Conference **registration fees** to as many delegates as possible. Each applicant **must** provide partial coverage for the registration fees. This will not include any discounts for meal or campus housing costs.
- If you apply for assistance before the Early Bird registration date you will receive the Early Bird registration discount regardless of whether or not we are able to offer you financial assistance. **If you are awarded financial assistance, you will not be eligible for any other discount.**
- Assistance Application must be received by the Exodus office no later than **June 7, 2010**. No applications will be reviewed after this date.
- All acceptance and denial letters will be posted no later than **June 7, 2010**. Please do **not** complete your conference registration before you receive your acceptance or denial letter. **No assistance will be given in the form of a refund.**
- If you have previously attended an Exodus Freedom Conference and receive financial assistance from Exodus this year, please note that we request you volunteer at the conference.



**Assistance Application**  
**Due June 7, 2010**  
 Please print clearly

Name:	Age:
Street Address:	
City, State, Zip:	
Email Address:	
Phone Number:	
Church Affiliation:	
Exodus Ministry Affiliation (if app):	
# of Int'l Conferences attended prior to 2010:	

**Please check the appropriate box if applicable:**

- I am a parent of a struggling or gay child.**
- My marriage has been affected by homosexuality.**
- I am under the age of 25.**
- This is my first Exodus Conference.**
- I am a Pastor or leader in my church who wants to learn more about ministering to those affected by unwanted homosexuality.**

Please indicate (in dollar amount) what part of the Exodus Freedom Conference's registration fees you plan to cover: \_\_\_\_\_

Are you planning on purchasing the meal and housing packages available through Concordia University? Yes or No

*I have read and agree to follow Assistance Program Policies outlined on the first page of this application:*

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Office Use Only:  
 \_\_\_\_\_ Staff Initials  
 \_\_\_\_\_ Date Rec'd