

Kairos Prison Ministry

Standard Closing Application-Lynaugh Unit

Texas District

Persons under eighteen (18) years of age cannot be admitted!!!

Approximately one week before closing, you will receive a packet of information from a closing Registrar giving you the time to be at the prison gate and directions on how to get there. You will be met at the gate by the Chaplain, and she will escort the group into Kairos Closing.

An incomplete application or an application received after the deadline cannot be processed. **You will not be able to get into the prison unless your application is processed and approved!!!**

Prefix	First Name (on driver's license)	Middle	Last Name (on driver's license)	Suffix	Lay/Clergy
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Home Address					
<input style="width: 100%;" type="text"/>					
CITY		STATE		ZIP	
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>	
DAY AREA	DAY NUMBER	EVE AREA	EVE NUMBER	FAX	E-MAIL
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Drivers License No. & State			Date of birth		
<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>

Email address: _____

Have you attended TDCJ volunteer training/orientation?..... YES___ NO___

Are you an ex-offender?..... YES___ NO___

Are you related to or do you know any inmates in this Unit (other than KAIROS)?... YES___ NO___

Are you on a visitation list for any inmates in this Unit?..... YES___ NO___

If "YES", their name(s): _____ TDCJ # (if known): _____

Their relationship (son, daughter, friend, fiancé, etc.): _____

I will read the "Guidelines for Prison" that will be sent to me with my letter of acceptance.
 I also understand that this application will be checked for outstanding warrants.

I request bus transportation or carpooling help: Y___ N___

Signature(optional) _____ Date _____

<p>I want to attend the closing for:</p> <p>Kairos #43 Lynaugh Unit Ft. Stockton, Texas 2pm Sunday, May 22, 2022</p> <p>We will email or mail you driving instructions.</p>	<p>Please mail or email application to:</p> <p>Doug Bramley 5811 Sabine Drive Midland TX 79707 dbbramley@gmail.com</p> <p>Cell 432-889-1748</p>
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This application should be received by the registrar shown above at least two weeks before the closing date. Applications received after that time **may** not complete processing in time for you to attend. Deadline for applications is **May 5, 2022**