

# MISSION TRIP APPLICATION

**Instructions:** Download the Trip Application Packet – Complete for every person who will travel – Return to MCM – Please Print

## MISSION TRIP

Mission Trip Location \_\_\_\_\_ Dates Preferred \_\_\_\_\_

- I will travel
- As an individual
  - With a group from my church
  - With a group from my school

How do you plan to raise support to pay for the mission trip? \_\_\_\_\_

## INDIVIDUAL INFORMATION

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Are you a Christian? \_\_\_\_\_ How long have you known Jesus as Savior? \_\_\_\_\_

**Required for Visa:** Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Marital Status \_\_\_\_\_ SS# \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_

Passport number \_\_\_\_\_ Date Issued \_\_\_\_\_ U S Citizen? \_\_\_\_\_

Name of your Church \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Church Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Church Phone Number \_\_\_\_\_

## YOUR MISSION TRIP EXPERIENCE

Please explain why you feel you are to go on this mission trip. What do you hope to accomplish? \_\_\_\_\_

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

Please list your spiritual gifts, abilities or special training that you feel would be helpful on this mission project. \_\_\_\_\_

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

Describe your general health condition. \_\_\_\_\_

Allergies \_\_\_\_\_ Blood Type \_\_\_\_\_

Medications \_\_\_\_\_

## CONTACT PERSON IN CASE OF EMERGENCY

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Beneficiary (for travel insurance policy) \_\_\_\_\_

## COMPLETE THIS SECTION IF TRAVELLING WITH A GROUP

Name of your Church, School or Organization \_\_\_\_\_

Group Leader's Name \_\_\_\_\_ Leader's Email \_\_\_\_\_

Church, School, Organization Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Cell Number \_\_\_\_\_

## MISSION TRIP COVENANT

As a member of a mission team sponsored in whole or in part by Macedonian Call Ministries I agree to:

1. Go as a servant-disciple of Jesus Christ and will adopt that attitude when dealing with my fellow team members.
2. Spiritually prepare for the trip through a consecrated prayer life and by using a 30 Preparation Guide.
3. Accept the leadership authority of the team leader and abide by his/her decisions as they concern the mission trip
4. Attend all team meetings possible, both prior to departure and during the mission trip.
5. Refrain from meddling, complaining, and obscene or insensitive humor. I understand that travel, especially to remote locations, can be difficult, and I promise to adopt a flexible attitude and be supportive as plans may need to be changed. I understand that I must travel with the rest of the team, unless prior arrangements are made.
6. Abstain from the use of tobacco, alcoholic beverages and any illegal drugs or prohibited activity while on this trip.
7. Act as a servant-disciple of the local pastor or mission organization. I will respect the advice I am given concerning attire, eating and drinking, and other such traditions which will help me to assimilate into the local community.
8. I agree that in the event my conduct is considered so unsatisfactory that it jeopardizes the success of the trip that my services in connection with this mission trip shall end and I shall return home immediately at my own expense.
9. In signing below, I represent that I am 18 years of age or older or my parent/guardian will sign also, accepting the above conditions on my behalf.

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

## EMERGENCY RELEASE AND RIGHT OF REPRESENTATION

In consideration of my participation on this mission trip to \_\_\_\_\_ represent and agree that:

1. I am prepared physically, emotionally, mentally and spiritually for this trip. The scheduling, environment and other foreign country and travel conditions are not adverse to me. I will be flexible and have a servant attitude.
2. I grant to any of the Macedonian Call Ministries leaders or their contracted agents the right to represent me in decisions relating to my welfare or the group welfare during the trip. I will follow the suggestions made on my behalf.
3. I understand the administrative roll that Macedonian Call Ministries plays in putting together our mission trip. I also understand that the mission trip will be handled by a contracted agent of Macedonian Call Ministries in country and the contracted agent will be responsible for the trip and the team.
4. I hereby grant any of the Macedonian Call Ministries leaders or their contracted agents my permission to authorize medical treatment and medication on my behalf. I will not hold any of the Macedonian Call Ministries leaders or their contracted agents responsible for the results of such treatment, medications or decisions made on my behalf.
5. I am aware of the hazards and risks to myself and property associated with this mission trip. I have read the U.S. State Department's Travel Advisory (if any) for this country found at [http://travel.state.gov/travel\\_warnings.html](http://travel.state.gov/travel_warnings.html). These risks include, but are not limited to, death or injury by accident, disease, terrorist acts, weather conditions, and inadequate medical services and supplies. I accept these conditions with full awareness and I assume all risks of death, injury, illness, terrorist assaults and personal property loss or damage associated with such risks.
6. I attest and certify that I am physically fit and have no medical conditions that would prevent me from performing my assigned duties which may include long hikes, high altitude, heat, limited and infrequent meals. I am aware of the disease risks associated with foreign travel and I accept these risks.
7. I waive any and all claims for damages against Macedonian Call Ministries, Macedonian Call Ministries leaders or their contracted agents, arising from death, injury, illness, inconvenience, or in property damage or loss occurring as a result of this mission trip for any reason including but not limited to any negligent act or acts of Macedonian Call Ministries, Macedonian Call Ministries leaders or their contracted agents which may in any way cause death, injury, illness, inconvenience or property damage or loss to me. I have read this release in its entirety, understand its contents and agree to them of my own free will.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_