

Short-Term Mission Trip Application

Mission Trip Location:

* Honduras
* CBM UK
* Moldova
* Guatemala
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_

Checklist:

* Application
* Copy of Passport
* Personal Testimony
* Signature
* Deposit $100

How did you hear about the mission trip?

**Personal Information**

 Male Female

Name of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Passport Expiration Date: \_\_\_\_\_\_\_\_\_\_\_

If no passport, date you applied for the passport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name as on Passport: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (First) (Middle) (Last)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (City) (State) (Zip)

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Marital Status: Single Engaged Widowed Married Separated Divorced Divorced/Remarried

If married, spouse’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is your spouse supportive of you applying for this trip? Yes No

(If no, please explain)

Names and ages of children:

T-shirt Size Small Medium Large XL

Foreign Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fluent Limited

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Foreign Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fluent Limited

List previous mission experience:

Please indicate any skills, talents, spiritual gifts or Christian ministry experience that you feel may be helpful on the field.

**Church and Spiritual Information**

What church do you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pastor’s Contact Information (email or phone): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long have you attended? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a member? Yes No

Please list the church ministries with which you have been involved (Please include dates of involvement and any leadership positions held.)

**Please attach a paper** articulating your story: who you were before Jesus, how you came to know Him, and your life now.

Please explain briefly what you hope to see the Lord do in and through you on this mission project and explain why you want to participate:

**Medical Information**

My health is:

Please state any major illness(es) or surgeries you have had in the last 5 years.

Are you currently under the care of a physician? Yes No

(If yes, please explain)

Are you currently taking any medications? Yes No

(If yes, please explain)

Please list any allergies:

Do you have any special health needs? Yes No

(If yes, please explain)

Insurance Carrier: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMERGENCY CONTACT:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**References**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STATEMENT OF FAITH**

Children’s Bible Ministries bases its ministry on this statement of faith:

1. We believe the Bible to be the inspired, the only infallible, authoritative Word of God. 2 Timothy 3:15-17
2. We believe in the one true God, eternally existent in three persons: Father, Son, and Holy Spirit. Matthew 28:19; Ephesians 4:4-6.
3. We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory. John 1:1-4; Matthew 1:23; Philippians 2:5-11; Hebrews 1:1-4 & 4:15; Acts 1:11 & 2:22-24; 1 Corinthians 15:3-4.
4. We believe in the present ministry of the Holy Spirit whose indwelling enables the Christian to live a godly life. Galatians 5:16-18; Romans 8:9.
5. We believe in the resurrection of both the saved and the lost; the saved unto the resurrection of eternal life, and the lost unto the resurrection of eternal punishment apart from God. Revelation 20:11-15; 1 Corinthians 15:51-57.
6. We believe in the spiritual unity of believers in our Lord Jesus Christ, and that all true believers are members of His body, the Church. Ephesians 1:22-23; 1 Corinthians 12:12, 27.
7. We believe that the ministry of evangelism is a responsibility of both the Church and each Christian. Romans 10:9-15; Acts 1:8; Matthew 28:18-20; 1 Peter 3:15

Check one:

\_\_\_ I agree with this statement of faith.
\_\_\_ I disagree with this statement of faith (list reasons on back of page)

Although I disagree, I will uphold the elements in the statement of faith and not hinder the ministry on this trip. (initial here) \_\_\_\_\_\_\_

**Children’s Bible Ministries Short-Term Mission Trip Agreement**

I make a commitment to:

* Faithfully go through the training process prior to departure and after I return from the trip
* Raise the necessary prayer and financial support
* Submit to the authority of the trip leader and the host on-the-field
* Conduct myself in a manner worthy of the Lord while serving Him on the project
* Refrain from any behavior which may compromise my witness.

Additionally, if at any time while on the project my behavior constitutes a problem, the team leader has the authority to ask me to return home. Any additional cost incurred as a result of this action will be at my cost.
Should any illness or medical emergency be required; I agree to pay all medical expenses in excess of the amount provided by any applicable insurance policy. (initial here) \_\_\_\_\_\_\_\_\_\_

**Photo Release**

I agree to the publication of the name and identity of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Name of the Intern appearing in Media Publication)

I hereby give Children’s Bible Ministries and all of its areas the right and permission to publish, without charge, photos and/or video taken during the National Internship Program. These photos and/or videos may be used in publications, including electronic publications, or in audiovisual presentations, promotional literature, advertising, etc.

(initial here) \_\_\_\_\_\_\_\_\_\_

**Legal Waiver**

I understand and agree that Children’s Bible Ministries its staff or other representatives assume no responsibility for the loss of property, damage to the same, personal harm, illness, or loss of life, that may occur during the execution of this volunteer mission project; and I, for myself, my heirs, executor, administrators, distributes, and assigns, in consideration of my admission to volunteer service and other good and valuable considerations, do hereby absolve said Children’s Bible Ministries, and hold them harmless from any claim or demand which I or they might conceivably assert upon the basis of the foregoing. I understand that I will be under the policies of Interlocking Ministries and my field supervisor. I agree to abstain from the use of tobacco products, alcoholic beverages, illegal drugs, and any other behavior that would hinder Christian ministry. I understand that the breach of this contract will be cause for dismissal from the volunteer project and return home at my own expense.

Participant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_