



Missions Project Application and Commitment Form

Project Location: \_\_\_\_\_ Date(s): \_\_\_\_\_

Team Leader: \_\_\_\_\_

**General Information:**

Full Name as in Passport (If application is in process, write name as it will appear in passport)

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Gender: Male Female Marital Status: Single Married

Spouse's Name \_\_\_\_\_

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

Primary Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Emergency Contact (Do not list someone who will be traveling with you)

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

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Do you speak the language of the host country? Yes No

**General Condition of Health:** Excellent Good Fair Poor

List any medical conditions that we need to be aware of or require special care; chronic diseases, drug allergies and prescription drugs you take. Attach a separate sheet if necessary.

**Church Involvement:**

Church Membership: FBC Allen Yes No Other: \_\_\_\_\_

How long have you been a member: \_\_\_\_\_

Are you an active member of a BFG? Yes No

Name of BFG teacher: \_\_\_\_\_ Length of time in class: \_\_\_\_\_

**Service:** Describe ways you are on mission for Christ (service within FBC Allen or community)

**Mission Experience:** List country, date(s) and type of work (evangelism, construction, medical, etc.)

**Testimony of Salvation and Call to Go:**

Tell us about your salvation experience:

How is your life now that you know Him?

In what areas of your life have you seen spiritual growth over the last month, year and 3 years?

Describe ways you are on mission for Christ (service within FBCAllen community):

Briefly describe why you see God calling you to participate on this trip:

## Participant Agreement

I have completed the Gospel Conversation (3 Circle) training and agree to participate in the harvest upon my return.

I have read the five missions articles provided by the Team Leader and understand the content.

I am willing and able to fulfill the responsibilities for this project.

I will go to selected BFG classes to speak about the project before and after the trip.

I would like to use scholarship funds provided by FBC Allen to pay for my trip.

**(Note: Scholarship funds are only available to current FBC Allen members once per year).**

I agree to complete the required pre-trip training that will be provided by the church.

I agree to submit to the authority of Trip Leader and comply with any instructions given during the project.

I agree to abstain from the use of tobacco products, alcoholic beverages, illegal drugs, and any other behavior that would hinder Christian ministry while on the mission trip.

I understand that the breach of this contract will be cause for dismissal from the project and return home at my own expense.

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the Mission Project. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

The participant also understands that the deposit is non-refundable and he/she will be responsible for airline tickets purchased in his/her name upon cancellation. The training meetings for this mission project are critical for the spiritual unity and physical preparation of the entire team. The participant understands what he/she is committing to. If married, the participant also declares that he/she has clearly communicated to his/her spouse the details of this project and that his/her spouse is supportive of his/her participation. The participant declares they have read the summary of insurance coverage for all international Mission Projects taken with FBC Allen and understands his/her responsibilities regarding the processing of medical claims that occur on foreign mission trips. The participant commits to do his/her part in working with the mission department at FBC Allen to insure that all claims get processed in a timely manner.

Participant's Signature: \_\_\_\_\_

Parent/Guardian, if participant is a minor: \_\_\_\_\_

**Church Leader Endorsement:** (Please have a BFG leader or other church leader sign below)

I recommend that this applicant represents Jesus Christ and our church on the mission field.

Church Leader's Name \_\_\_\_\_ Phone \_\_\_\_\_

Church Leader's Signature \_\_\_\_\_ Date \_\_\_\_\_