

## Application for Short-Term Mission Team Grace Point Church of Paradise

Participating in a missions trip through Grace Point Church is a great opportunity to represent the name of Christ and the ministry of GPC around the world.

We hope this application will be a first step in helping you consider some of the ways God might be ready to stretch you.

*(Please print or type)*

Team applying for: \_\_\_\_\_

### GENERAL INFORMATION

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(\*\*as it appears on your passport for int'l trips and driver's license for U.S. trips)

Permanent Address \_\_\_\_\_

Present Address \_\_\_\_\_

Home Telephone \_\_\_\_\_ Work Telephone \_\_\_\_\_ Email \_\_\_\_\_

Where do you work or attend school? \_\_\_\_\_

Briefly describe what you do for a living and/or what you are planning to do:

What foreign languages do you speak? Please list language and proficiency (fluent, conversational, basic understanding)

Describe your health: Vigorous \_\_\_ Average \_\_\_ Poor \_\_\_

Are you under a physician's care? Yes / No

Any medication requirements? Yes / No If yes, explain

Specific allergies or reactions? Yes / No If yes, please detail.

\*\*\*To apply for first time passport or to renew current passport, visit [www.travel.state.gov/passport](http://www.travel.state.gov/passport), or enter your zip code on this page, <http://iafdb.travel.state.gov/> to find the nearest passport facility. Many libraries offer this service. Fees for passports are not included in the cost of the trip.

**GENERAL INFORMATION - Continued**

Do reactions require emergency care? Yes / No If yes, please detail.

I have confirmed with my insurance carrier that my plan covers medical procedures overseas? Yes / No

Name of company \_\_\_\_\_ Policy number \_\_\_\_\_

Name of parents (if minor) \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Emergency contact (other than parents, if minor)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Are any of the following factors applicable? Explain.

\_\_\_ Physical disability \_\_\_\_\_

\_\_\_ Special dietary requirements \_\_\_\_\_

\_\_\_ Opposition from parents or other family members to your participation

Please provide names, addresses and telephone numbers of 2 people (1 outside GPC, 1 inside GPC) who can be contacted by the Missions Team as references:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATIONAL BACKGROUND**

	<u>Years</u>	<u>Field of study</u>
High school: _____	_____	_____
College/other: _____	_____	_____
Post-college: _____	_____	_____

**SPIRITUAL LIFE INFORMATION**

Where do you hold church membership? \_\_\_\_\_

How long have you been attending? \_\_\_\_\_

Describe your personal testimony of faith in Christ:

What are your spiritual gifts?

Please describe your approach to your personal spiritual growth:

Are you confident in explaining the Gospel to someone? Yes / No

How has your evangelistic concern for people without Christ been expressed during the past year?

**CHRISTIAN MINISTRY INFORMATION**

In what ministries of the church are you presently serving?

Describe other previous ministry/missions experience:

What skills do you have which may be of value on a missions project?

\_\_\_ leading Bible studies      \_\_\_ preaching      \_\_\_ teaching      \_\_\_ leading singing

\_\_\_ mime      \_\_\_ puppetry      \_\_\_ carpentry      \_\_\_ plumbing

\_\_\_ electrical      \_\_\_ administration/organization

\_\_\_ playing a musical instrument (which? \_\_\_\_\_)

\_\_\_ sports (which? \_\_\_\_\_)

\_\_\_ others \_\_\_\_\_

**CHRISTIAN MINISTRY INFORMATION - Continued**

Why do you desire to be a part of this mission team?

How do you hope to grow personally as a member of this mission team?

**FOR POTENTIAL TEAM LEADERS:**

Have you led a short-term team in the past? Yes / No If so, please describe: \_\_\_\_\_

---

---

Do you have experience in leading any other ministry teams? Yes / No If so, please explain: \_\_\_\_\_

---

---

Members of the Missions Team and your Team Leader will review your application. We ask that a \$100 contribution toward your prospective short-term missions project accompany your application.

If accepted for this mission project, I will participate voluntarily. I will not hold team leaders, the sponsoring mission/missionaries, or Grace Point Church responsible for any accident, injury, illness, or other personal loss that might result from this trip. I will submit to team leadership and will maintain a cooperative spirit in all activities. To the best of my ability, I will participate in training and evaluation sessions.

---

Signature

---

Date

## Grace Point Church Mission Trip Covenant

As a member of the Grace Point Team, I commit to actively participate and support the whole team to accomplish the goals of our particular project. I recognize by being a part of this team that I am agreeing to the following:

- Set aside specific time on a regular basis for Bible study and prayer for personal and team preparation.
- Commit to serve the team, team leader, and missionaries in the field. I will bring a spirit of *flexibility* to the project, assuming that plans often change.
- I will commit to be part of team meetings, pre-trip requirements, and support raising for the trip.
- I acknowledge that it is my responsibility to have a passport and all immunizations.
- Follow the rules and standards of behavior set by my team and team leader to the best of my ability. Failure to do so could result in being sent home on my own expense.
- Seek to be sensitive in words, actions, and dress regarding the country's culture if trip is outside the U.S.
- I will seek to have my main focus on the Team and Team Goals. Therefore, I will refrain from any relationships that detract from the Team and its purpose. Spouses and others in relationships are expected to participate fully in team activities.

### *Financial Requirements:*

- I acknowledge that I am responsible for payment for my portion of the airfare and general trip costs. These funds can be a combination of personal funds and assistance from family and friends (as per instructions given by team leader).

### *Background Check:*

- I give my permission to Grace Point Church to do a criminal background clearance check.

In signing below, I hereby agree to follow thru with ALL commitments listed above and that all information given in this application is accurate.

---

Print Name

---

Signature / Date

If minor, parental/guardian signatures required also:

---

Print Name

---

Signature / Date

---

Print Name

---

Signature / Date