



# EVERY NATION

## WORLD MISSIONS

### MISSION TRIP APPLICATION for Belize 2009

**Please Note:** This is an **application** used for consideration of **potential** participation in a mission's project. Completion and submission of this form does **not** guarantee placement on a mission's team.

#### Application Instructions

1. Please type or print clearly your portion of the application. Fill out the entire application and be sure to sign the **Mission Team Covenant, Release and Assumption of Risk Agreement, and Confidential Medical Information Form**. Your application will not be processed unless application is complete.
2. Make a photocopy of your passport & passport photo to submit with your completed application. (If you do not have a passport, start the process of obtaining a passport now– it can take up to two months. Submit a photocopy of it to the mission trip leader as soon as you get it.)
3. Give the **Reference Form** to the small group leader/church member who knows you best and is **not** a leader of the mission trip you are applying for. He/she should return the complete form to you in a sealed envelope (see directions on reference form) to the mission trip leader.
4. Give the **Peer Reference Form** to a roommate or close friend of the same gender. If possible, choose a peer who has been on a mission trip. He/she should return the completed form to you in a sealed envelope with his/her signature over the sealed flap.
5. **Enclose the completed application, the two reference forms, and a \$50 deposit together in a single envelope and give to the mission trip leader.** Your deposit will be returned to you if your request for participation is not accepted, unless you choose to donate it to the mission's project. If you choose the latter option, you will be receipted for a \$50 tax deductible donation. If you are offered a position on the team, your deposit will go towards the overall cost of the mission's trip.
6. Questions? Problems? Email: Brad @ [bstretton@platinum.ca](mailto:bstretton@platinum.ca) or Natasha @ [natasha.gb@uchurch.ca](mailto:natasha.gb@uchurch.ca)

I have read, understood, and will comply with the application instructions and process.

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Signature

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Date



**Please answer the following questions:**

1. Why do you want to participate in this particular mission project?
2. What is your current involvement in world missions? (Missions study/prayer group, friendship with international students, regular personal prayer for specific missions concerns, read mission books and periodicals, etc.)
3. What is your current involvement in evangelism? Be specific.
4. Have you had any experience discipling others? If so, please describe.
5. How will your local church benefit from your participation in this mission project?
6. What experience have you had in cross-cultural relationships? (Previous travel or residence overseas, involvement with students from other countries or ethnic groups, etc.)
7. What languages do you speak (other than English)? Indicate your proficiency: 1=read, write and speak fluently, 2=read, write and speak some, 3=read, write and speak little, 4=speak and comprehend fluently, and 5=speak and comprehend some.
8. List your skills, musical abilities, special talents, and ministry experience.
9. In your opinion, what are your strengths and weaknesses?
10. On a separate sheet of paper, please write (typed or written neatly) a brief account of how you came to know Jesus Christ personally and how He has changed your life. Your "testimony" needs to be approximately three minutes in length. Retain a copy of this so you can familiarize yourself with it and be prepared to present it as opportunities come up on your mission trip. Please be sure to type or print clearly.

# HEALTH INFORMATION FORM

Full name \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_

Medical Services Plan # \_\_\_\_\_

## Health Insurance

Do you have extended medical insurance?    Yes    No       

Company \_\_\_\_\_

Policy Number \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

## Emergency Contact Information

Who shall we call in the event of an emergency (you must list three):

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

## Medical Questions

1. Do you have any physical conditions which may limit you, such as serious allergies requiring medication, back problems, limited mobility, extremely poor eyesight, hearing loss, etc.?  
 Yes     No    If yes, please specify
  
2. Are you currently taking any medications?  
 Yes     No    If yes, please list names and dosages
  
3. Do you have any special dietary restrictions (vegetarian, diabetic, allergies, etc.)?  
 Yes     No    If yes, please specify
  
4. Any other medical conditions you would like to mention?



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## MISSIONS TEAM COVENANT

*Please sign your initials on the line to the left of each statement once you have read it. After you have completed reading the entire covenant, sign at the bottom and have your pastor or church staff member sign as well.*

- \_\_\_\_\_ 1. I will make every effort to meet the deadlines for turning in my support and know that I may be removed from the team if this is not fulfilled.
- \_\_\_\_\_ 2. As a team member, I will work under the leadership of the team leaders, following the behavioral, spiritual and safety guidelines they give our team.
- \_\_\_\_\_ 3. I will not complain during the trip and/or cause dissension.
- \_\_\_\_\_ 4. I understand that I am not to pursue any romantic interest or develop any "special relationship" during this trip. Should I become interested in anyone during the mission, I understand that I may tell a team leader about this interest if I choose, but I may not discuss it with this person or with any other team member during the trip.
- ===== 5. I will follow the team's and the culture's dress codes.
- \_\_\_\_\_ 6. I will try to be sensitive to the practices, food, and living situation of the culture that I am visiting, neither criticizing nor complaining.
- \_\_\_\_\_ 7. I understand that I may be sent back to Canada at my own expense if I'm unable or unwilling to meet these conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*Your signature*

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*Your pastor or church reference*



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## RELEASE AND ASSUMPTION OF RISK AGREEMENT

I, \_\_\_\_\_, intend to participate in an Every Nation Ministries-advocated mission trip to \_\_\_\_\_. Every Nation Ministries is promoting this mission trip in cooperation with other local churches within the Every Nation church family. My participation in this mission trip is entirely voluntary.

I voluntarily assume all risk to myself and my property (including the possible risk of accident, injury, illness, death, damage, loss, and destruction) arising from my travel and participation in this trip. I assume such risks regardless of their causes, which may include, but are not limited to, the failure to supervise any persons, traveling to and from the foreign country, Canadian departure site, foreign cities, and various personal/recreational ventures made on my own during the trip, and the negligence of third parties.

In consideration of Every Nation Ministries' advocacy of this trip and their permitting my participation, I will not hold my local church or Every Nation Ministries or its trustees, officers, employees, ministers, or leaders liable in damages or any injuries I might sustain during the mission trip. I release, discharge, and forever hold harmless my local church, Every Nation Ministries and its trustees, officers, employees, ministers, or leaders, in both their individual and representative capacities as applicable, from any and all liabilities, claims, damages, physically or emotionally, or losses stemming from injury to person or property that arise from or in any way relate to my participation in this mission trip.

I have carefully read this Release and Assumption of Risk agreement and understand its contents. I voluntarily sign it and realize that it will bind me, my family, my heirs, and personal representatives.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*your signature*

Signature \_\_\_\_\_ Date \_\_\_\_\_  
*parent or legal guardian if under 18 years of age*

**Proof of age is required with this form.**  
**Please send a photocopy of your birth certificate or driver's license. Parent or legal guardian must sign if participant is under 18 years of age by the date of signing above.**



## REFERENCE FORM

To be completed by a small group leader or church member

Please return this form to the applicant in a sealed envelope.

**Applicant** Name \_\_\_\_\_

**Reference** Name \_\_\_\_\_ Address \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ City, province, postal code \_\_\_\_\_

Email Address \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_ How well do you know the applicant? \_\_\_\_\_

**Note:** Because this reference is used for both acceptance and development, it is most valuable when filled out objectively. Please avoid the temptation to make the applicant appear perfect. Circle the appropriate number on each scale. Circle n/a if your knowledge is insufficient in that area.

1 = excellent 2 = good 3 = average 4 = needs 5 = poor improvement

<b>Responsibility</b> - <i>Faithfully carries out obligations</i>	1	2	3	4	5	n/a
<b>Adaptability</b> - <i>Adjusts well to changes in circumstances</i>	1	2	3	4	5	n/a
<b>Perseverance</b> - <i>Moves ahead in the face of adversity</i>	1	2	3	4	5	n/a
<b>Personal Appearance and Manners</b>	1	2	3	4	5	n/a
<b>Cooperation and Teamwork</b>	1	2	3	4	5	n/a
<b>Communication</b> - <i>Presents thoughts with clarity and logic</i>	1	2	3	4	5	n/a
<b>Spiritual Maturity</b> - <i>Demonstrates mature walk with God</i>	1	2	3	4	5	n/a
<b>Emotional Stability</b> - <i>Responds well to stressful situations</i>	1	2	3	4	5	n/a
<b>Sensitivity</b> - <i>Sensitive to the needs and feelings of others</i>	1	2	3	4	5	n/a
<b>Personal Ministry</b> - <i>Effective personal influence for Christ</i>	1	2	3	4	5	n/a
<b>Initiating with others</b> - <i>Begins conversations with ease</i>	1	2	3	4	5	n/a
<b>Teachability</b> - <i>Willingness to receive instruction and counsel</i>	1	2	3	4	5	n/a

**Please answer the following questions:**

1. What are the applicant's greatest strengths?
2. What areas need development or attention?
3. Describe the applicant's social maturity (confidence and poise in interaction with others).
4. How does this applicant respond to authority?
5. What type of leadership has the applicant exhibited? Be specific. What leadership potential do you see in him/her?
6. Do you have any reservations about this person participating in a mission trip?
7. Please note anything further about the applicant that we should know.

I find this applicant:

- Definitely well-suited for the mission field – fully recommended
- A good candidate for the short-term mission trip
- An average prospect with slight reservations
- Not suited for the mission field

Signature \_\_\_\_\_

Date \_\_\_\_\_

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TO THE APPLICANT IN A  
SEALED ENVELOPE WITH  
YOUR SIGNATURE OVER THE  
SEALED FLAP.



## PEER REFERENCE FORM

To be completed by a roommate or friend of the same gender

Please return this form to the applicant in a sealed envelope.

**Applicant** Name \_\_\_\_\_

**Reference** Name \_\_\_\_\_ Address \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ City, province, postal code \_\_\_\_\_

Email Address \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_

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Date \_\_\_\_\_

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