Church in the City – Beth Abraham
1580 Gaylord St.
Denver, CO 80206
303-322-5733
churchinthecity.org

SHORT-TERM MISSIONS OUTREACH APPLICATION

Personal Information (PLEASE PRINT LEGIBLY):				
Full Legal Name (as on passport)				
First:	Middle:	Last Name:		
Passport #:	Date of Issue:	Expiration Date:		
AGE: Date of Birth:	Gender:	Marital Status:		
Email Address:	Cell Phone #:	Home Phone #:		
Address:				
No. and Street:	Apt #:	City:	State:	Zip Code:
Emergency Contact Information				
Name:		Relationship:		
Cell Phone:	Work/Daytime:	Home Phone:		
MISSION TRIP YOU WISH TO PARTICIPATE IN:	SCHEDULED DATES FOR THE TRIP:	LIST ANY FAMILY MEMBERS PARTICIPATING:		

Please answer the following questions:

1. DO YOU ATTEND CHURCH IN THE CITY – BETH ABRAHAM?

2. IF SO, HOW LONG HAVE YOU ATTENDED?

3. IF NOT, WHAT CONGREGATION DO YOU ATTEND AND FOR HOW LONG?

4. PLEASE SHARE THE NAME OF YOUR PASTOR OR CONGREGATIONAL LEADER:

   NAME: POSITION: PHONE #:

5. HOW ARE YOU PRESENTLY SERVING THE LORD?

6. PLEASE SHARE YOUR OUTREACH AND/OR MISSIONS EXPERIENCE (and the name of the ministry you worked with):

7. WHY WOULD YOU LIKE TO PARTICIPATE IN THIS OUTREACH?

8. WHAT ARE YOUR SKILLS, GIFTS, OR TALENTS, AND ARE YOU WILLING TO USE THEM ON THIS MISSION? (Example: medical, construction, musical, drama, children, cooking, interpretation, helping, intercessory prayer, hands-on prayer ministry, etc.)

DO YOU SPEAK A LANGUAGE BESIDES ENGLISH? YES NO (CIRCLE ONE)

IF YES, WHAT LANGUAGE(S): _____ DEGREE OF FLUENCY: _____

9. DO YOU HAVE ANY TRAINING IN EVANGELISM?

DO YOU HAVE ANY TRAINING OR EXPERIENCE IN LEADING BIBLE STUDIES?

10. HOW LONG HAVE YOU BEEN A CHRISTIAN?

BRIEFLY DESCRIBE YOUR RELATIONSHIP WITH THE LORD:

11. HAVE YOU TAKEN FIRST-AID TRAINING?

YES NO (CIRCLE ONE) DATE AND TYPE:_____

12. DO YOU HAVE ANY PHYSICAL LIMITATIONS? ALLERGIES?

HAVE YOU HAD ANY MAJOR ILLNESSES IN THE PAST YEAR? YES NO (CIRCLE ONE)

PLEASE EXPLAIN:_____

ARE YOU ON ANY MEDICATIONS? YES NO (CIRCLE ONE)

IF SO, PLEASE LIST THE MEDICATIONS YOU ARE TAKING:_____

HEALTH INSURANCE COMPANY: _____PHONE #:_____

NAME OF INSURED_____ POLICY #_____ PLAN #_____
(Please check with your carrier to see if you are insured while travelling.)

13. AUTHORIZATION FOR EMERGENCY MEDICAL CARE:

I, _____, THE UNDERSIGNED, BIRTH DATE:_____
DO HEREBY AUTHORIZE ANY NECESSARY EXAMINATION, ANESTHETIC, DENTAL, MEDICAL AND SURGICAL DIAGNOSIS OR TREATMENT BY ANY DULY LICENSED PHYSICIAN, DENTIST OR HOSPITAL SERVICE THAY MAY BE DEEMED NECESARRY SHOULD I EXPERIENCE ANY ILLNESS OR ACCIDENT WHILE PARTICIPATING ON THE SHORT-TERM MISSION TRIP ORGANIZED BY CHURCH IN THE CITY – BETH ABRAHAM.

DESTINATION OF SHORT TERM MISSION TRIP:_____

TRAVEL DATES: FROM_____ /_____ /_____ TO _____ /_____ /_____

DATE:_____ SIGNATURE:_____

FOR MINORS: SIGNATURE OF PARENT / GUARDIAN _____
(PLEASE CIRCLE ONE)

14. HAVE YOU HAD THE REQUIRED OR SUGGESTED IMMUNIZATIONS FOR THIS TRIP?

YES NO (CIRCLE ONE)

IF NOT, WHEN WILL YOU UPDATE THEM? _____
(PLEASE NOTE: THE SUGGESTED OR REQUIRED IMMUNIZATIONS VARY FOR EACH COUNTRY. CONTACT YOUR HEALTH CARE PROVIDER OR LOCAL TRAVEL CLINIC FOR SPECIFIC IMMUNIZATIONS NEEDED OR ADVISED FOR THIS TRIP.)

15. WAIVER OF LIABILITY:

I, _____, THE UNDERSIGNED, AS A PARTICIPANT IN THE SHORT TERM MISSION TRIP TO

_____, (HEREAFTER REFERRED TO AS "THE TRIP") ADMINISTRATIVELY ORGANIZED BY CHURCH IN THE CITY – BETH ABRAHAM (HEREAFTER REFERRED TO AS "THE CHURCH") DO HEREBY VOLUNTARILY RELEASE, ACQUIT AND FOREVER DISCHARGE THE CHURCH AND ITS DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS AND AGENTS FROM ALL MANNER OF SUITS, ACTIONS, CLAIMS, DEMANDS AND LIABILITIES WHICH MAY ARISE FROM MY PARTICIPATION ON THIS TRIP. I RECOGNIZE BY ENGAGING IN THIS TRIP, I AM VOLUNTARILY SUBJECTING MYSELF TO CERTAIN CONDITIONS THAT ARE NOT THE SAME STANDARD AS THE CONDITIONS TO WHICH I AM ACCUSTOMED (I.E. POLITICAL ENVIRONMENTS, LAW ENFORCEMENT AND JUDICIAL SYSTEMS). I REALIZE FURTHER THAT THERE ARE CERTAIN HEALTH AND DETAINMENT RISKS, AS WELL AS RISKS TO ME AND MY PROPERTY, AND I ENTER INTO PARTICIPATION IN THIS TRIP WITH THE KNOWLEDGE OF THOSE RISKS. I UNDERSTAND THAT THIS DOCUMENT CONSTITUTES A FULL AND COMPLETE WAIVER OF ALL POSSIBLE CLAIMS, INCLUDING CLAIMS FOR NEGLIGENCE IN PERSONAL INJURY OR PROPERTY DAMAGE, ARISING OUT OF PARTICIPATION IN THIS TRIP. NO PROVISION OF THIS DOCUMENT SHALL, IN ANY WAY, LIMIT MY RIGHT TO MAKE CLAIMS AGAINST PERSONS OR ORGANIZATIONS OTHER THAN THE CHURCH, ITS DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS, AND AGENTS.

DATE:_____ SIGNATURE:_____

DATE:_____ PARENT / GUARDIAN SIGNATURE:_____
(CIRCLE ONE)
DATE RECEIVED:_____ AGENT OF THE CHURCH SIGNATURE:_____

16. I CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS COMPLETE AND ACCURATE. I AGREE TO ATTEND ALL TEAM MEETINGS, OBEY THE RULES OF THE SHORT-TERM MISSIONS OUTREACH AS OUTLINED IN THE TEAM COVENANT, PARTICIPATE WITH THE TEAM DURING THE OUTREACH, DEBRIEF WITH THE TEAM AFTERWARDS, AND REPORT TO THE CONGREGATION IF CALLED UPON.

Signature: _____ Date: _____
PLEASE NOTE THAT A DEPOSIT OF $200 IS REQUIRED TO RESERVE A SPACE ON THE TEAM. ALL CHECKS MUST BE MADE OUT TO CHURCH IN THE CITY.

FOR OFFICE USE ONLY:
DEPOSIT RECEIVED: $_____ CHECK #_____ DATE_____

RECEIVED BY: _____

STAFF: PLEASE PLACE COMPLETED APPLICATION AND PAYMENT IN BRENDA WALKER'S BOX.

17. TEAM COVENANT:

By signing this agreement, I understand and accept the following conditions and guidelines. I recognize that I am a member of this mission team and agree to:

a. Understand that I am not going as a tourist, but as a missionary servant and guest of the host country. My primary purpose is to share, to serve, and to learn.
b. Adopt an attitude that I am on this team to try to understand the host culture, not to convince them of my viewpoint or style. The host culture may do things very differently, and I understand that my way is not necessarily the best.
c. Abstain from making any derogatory comments or arguments regarding people, politics, sports, religion, race, or traditions.
d. Go as a disciple/servant of Jesus Christ and will adopt that attitude when dealing with my fellow team members, the people we meet, and those we are going to serve.
e. Accept and submit to the leadership role and authority of the team leader(s) and to abide by the leader(s) decisions as they concern the team and the trip.
f. Acknowledge that by engaging in this journey, I am subjecting myself to certain risks voluntarily, including and in addition to those that I normally face in my personal and business life—risks including but not limited to such things as health hazards due to different or

poor food and water, diseases, pests, and poor sanitation; also potential dangers from lack of control over the local population; or potential injury or accidents while working or travelling; and inadequate medical facilities.

g. I understand that the country I am going to may be at a different level of development than my own and I may not have the same conveniences I am accustomed to at home.

h. I understand that our team's work is but a small part of a larger picture that our mission partners/hosts are trying to accomplish. I will not be overly demanding. I will do my best not to offend or cause embarrassment for the partner/hosts; I will do my best to help them attain their long-term goals.

i. Expeditiously follow up on all requirements for passports, visas, financial obligations, vaccinations, and any other requirements.

j. Refrain from meddling, complaining, sarcasm, and obscene or insensitive humor. I realize that others on the team and our missions partners/hosts, as well as new believers or unbelievers we meet, look to me as an example of godly behavior.

k. I understand that travel can be difficult, and plans can change. I will adopt a flexible attitude and be supportive. I understand that I must travel with the rest of the team, unless other arrangements are made.

l. Regard the different styles of worship with respect. I will prayerfully witness my faith where I see a need and will refrain from having a superior attitude.

m. If a loved one or a close friend is part of the team, I will interact with all members of the team, not just with my loved one or friend.

n. Not initiate or seek a romantic relationships with other team members or indigenous people I meet while on the trip. I will avoid any actions that might be perceived as amorous attention toward any team members or indigenous people I meet.

o. Refrain from using tobacco or alcoholic beverages while en route to or in the host country. I will abstain from any illegal drugs or prohibited activity while on this trip.

p. Refrain from giving gifts such as money, clothes, jewelry, etc. Although the intent of the giver is good, the result after we leave can cause problems for the partner/hosts, including jealousy and bitterness amongst those who received no gifts. If I feel compelled to give a gift to someone I have met, I will consult first with the team leader before I promise or give the gift, and I will let him or her make the final decision on this matter.

q. Act as a servant/disciple of the local hosts/pastors or mission agency. I will follow the advice and instruction I am given concerning attire, eating, drinking, and other such traditions which will help me to assimilate into the local community.

r. Understand that every team member is expected to participate and to share freely of their particular gifts, talents, and skills— such as construction, carpentry, medical, music, art, cooking, serving, or basic physical labors (depending on the purpose/goals of the trip).

s. I agree that in the unlikely event my conduct is considered unsatisfactory or detrimental to the success of the mission, and if mediation fails to resolve the issues involved or to correct my behavior, that my services in connection with this mission shall end, and I will return home at my own expense.

t. I will not make any promises to the indigenous people I meet, I understand the intent is good but the likelihood of being able to fulfill those promises is slim to none. I will remember why we are there (the goals, vision, and focus of the mission).

t. If I am fundraising personally or as part of a team effort, any funds that I raise that exceeds the cost of this mission trip will be used on behalf of others on the team who are still in need, or the expenses the church incurs on behalf of the trip. If more funds are raised by team efforts than are needed for this mission trip, all extra funds become the property of the church to be used at the church's discretion and will go to the Missions Fund of Church in the City – Beth Abraham.

IN SIGNING BELOW, I REPRESENT THAT I AM 18 YEARS OF AGE OR OLDER (OR MY PARENT/GUARDIAN WILL ALSO SIGN ON MY BEHALF) AND THAT I ACCEPT THE ABOVE CONDITIONS LISTED ON THE TEAM COVENANT.

Participants Name (please print)_____

Participants Signature:_____ **Date:**_____

Signature of Parent / Guardian _____ **Date:**_____
(circle one)

This application can be emailed to brenda@citcba.com
or mailed to: Church in the City-Beth Abraham
Attn: Brenda Walker
1580 Gaylord St.
Denver, CO 80206