

Mission Trip Desired:
Mission Account

Approved:	ves	no

A) Basic Information First Name_____ Last Name____ Email______DOB____ City_____State____ Home Phone Cell Phone **B)** Emergency Contact Emergency Contact #2_____ Home Phone Cell Phone Relationship____ Emergency Contact #2_____ Email Home Phone _____ Cell Phone _____

Relationship

C) Passport Information (If traveling internationally)
Valid Passport yes no
Name exactly as it appears on Passport
Passport Number
Expiration Date
D) Background Information
Occupation
Employer
Marital Status
Spouse's Name
Spouse's Email
Spouse's Cell Phone
E) Church Background
1) Are you a member at Rose Heights Church and if so, then for how long?
2) If not a member at Rose Heights Church, where do you attend church? Are you a member and if so for how long?

3) What church classes or small groups do you participate in?	
4) What ways are you currently serving in the church or community and for how long?	
5) What ways have you previously served in the church or community and for how long?	

F) Travel

1) Please describe any special skills, talents, spiritual gifts, or service experience that you feel may be helpful on this mission trip (music, teaching, first aid, construction, etc.):
2) List all previous mission trip or cross-cultural experience:
3) Have you traveled internationally before? If so, please indicate what countries, for what purpose, and for how long?
4) Please list any foreign language skills you have.

F) Spiritual

1) Briefly share your personal testimony of faith.		

2) Briefly describe your patterns of personal devotion & discipleship.

3) What has God been teaching you this past year?
4) Why do you want to go on this mission trip and how has God been leading you in this direction?

8) Please list any concerns you have about joining this trip?		
9) Briefly explain what you hope to see the Lord do in and through you on this mission trip.		
G) Medical		
1) Do you have any physical conditions or allergies that a team leader should be aware of and/or which might affect you or the team on this trip? yes no		
2) If yes, please specify:		
3) Vaccinations/immunizations may be required for this trip. Will you meet with your medical provider to counsel regarding appropriate vaccinations/immunizations for this trip, comply with their recommendations, and provide proof of vaccinations/immunizations if asked to do so? yes no		

4) Do you currently have medical insurance? If so, please list policy name, number, and group number.
I) Miscellaneous
How do you plan to cover trip costs? (i.e., raise support, personal savings, etc.)
T-shirt size
Submit your completed application to:
Amanda Fishback Missions & Outreach Coordinator Rose Heights Church 2120 Old Omen Rd
Tyler, TX 75701

amandaf@roseheights.org

OCCASIONALLY A COUNTRY DOES NOT HAVE THE SAME CONVENIENCES YOU ARE USED TO AT HOME. IT IS VERY IMPORTANT TO BE FLEXIBLE AND WILLING TO ADJUST TO THE EXPECTATIONS OF YOUR HOST. I, ________, RECOGNIZE AND ACCEPT THE FOLLOWING CONDITIONS WHICH WILL FURTHER THE EFFECTIVENESS, USEFULNESS, AND SAFETY OF OUR SHORT-- TERM MISSION TRIP. I AGREE TO:

Release and discharge the organizations and individuals which helped make these arrangements, including Rose Heights Church, or any other sponsoring agencies, their agents, employees, officers, and volunteers, from all claims, demands, actions, judgments, or executions that I have ever had, or now have, or may have, or which my heirs, executors, administrators, or assigns may have or claim to have, against these organizations, their agents, for all personal injuries, known or unknown, and injuries to property, real or personal, caused by, or arising out of this journey. I intend to be legally bound by this statement.

Give Rose Heights Church and its representative(s) authority to request and authorize medical and/or hospital treatment for my benefit in the event of any injury or sickness sustained by me while on such trip, including, without limitation, while traveling to and from any foreign country. I agree to pay for all such treatment and to reimburse Rose Heights Church for all costs and expenses incurred by it with respect to such treatment. Adopt an attitude that I am on this team to try to understand the host culture, not to convince them of my own viewpoint or style.

Abstain from making derogatory comments or arguments regarding people, politics, sports, religion, race, or traditions.

Accept and submit to the authority of the team leader and promise to abide by his or her decisions on this mission trip.

Acknowledge that by engaging in this trip, I am subjecting myself to certain risks voluntarily, including and in addition to those risks that I normally face in my personal and business life, including but not limited to such things as health hazards due to poor food and water, diseases, pests, and poor sanitation; potential danger from lack of control over local population; potential injury while working; and inadequate medical facilities. Meet the financial obligation as requested on dates.

I will make every effort to attend team meetings, trainings and participate in team devotional readings, so that I will be adequately prepared for the mission trip.

If a loved one or dear friend is traveling with me, we agree to interact with all members on the team, not just one another. I promise not to initiate or seek new romantic relationships with team members or indigenous people during this trip.

Refrain from using tobacco, vape or alcoholic beverages while in the host country. Abstain from any illegal drugs or prohibited activity while on this trip.

Before giving gifts (such as money, clothes, jewelry, tape players, etc.) consult first with the team leader before you give the gift.

I agree that in the event my conduct is considered so unsatisfactory that it jeopardizes the success of the trip, and that mediation during the trip has failed to correct my behavior, that my services in connection with this mission shall end and I shall return home immediately at my own expense.

Signature:	Date: