

# Mission Trip Application Packet

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Short-term Mission Trip Application

“Therefore go and make disciples of all nations, baptizing them in the name of the Father and of the Son and of the Holy Spirit, and teaching them to obey everything I have commanded you.”

Matthew 28:19-20

## Short-Term Mission Trip Application

Lebanon Presbyterian Church Missions

123 East street, Lebanon, Ohio 45036

Phone 513-932-2751

At LPC, we seek to love and serve God and love and serve others. This necessitates obedience to Jesus' commands that we make disciples of all nations and serve as His witnesses from our hometowns to the ends of the earth. We are excited that you are taking a step of obedience in filling out this application to be part of a Short-Term Team. As you are filling out this application, please do not hesitate to contact us if you have questions. Once your application is submitted and reviewed, the Short-Term Team Leader will contact you with further details.

NOTE: Before filling out the Short-Term Mission Application please pay close attention to the following details:

- Every applicant applying for a Short-Term Mission Project MUST fill out an application and complete each individual section. This includes spouses and children 12 and older.
- A completed Medical Release Form and all materials on the application checklist must be turned in.
- Make sure that you have your passport information with you when you fill out this application (for international trips only).

**APPLICATION CHECKLIST**

- Completed Application
- Completed Medical Release Form
- Deposit (\$\_\_\_\_\_ deposit for North American trips; \$150 deposit for international trips)
- One (1) color copy of your passport (for international trips only)

**TRIP INFORMATION**

Application Date: \_\_\_\_\_ Trip Location: \_\_\_\_\_

Dates of Trip: \_\_\_\_\_ to \_\_\_\_\_

**PERSONAL INFORMATION**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Occupation and Professional Skills \_\_\_\_\_  
\_\_\_\_\_

**Marital Status**    Single    Married    Other \_\_\_\_\_    If Married, Spouse's Name: \_\_\_\_\_

If Children, Children's Name: \_\_\_\_\_

**MEMBERSHIP INFORMATION**

Are you a Member of LPC:    Yes    No

If not, are you a member of another church?:    No    Yes    Name of church: \_\_\_\_\_

Are you regularly involved in a Sunday School Class at LPC    Yes    No

Name of Sunday School Class Teacher: \_\_\_\_\_    How long have you been attending? \_\_\_\_\_

List any ministry involvement

List any cross-cultural or short-term mission experiences

**FINANCES**

The missions committee offers partial scholarships to qualifying individuals joining a Short-Term team. These include

- Team Leader
- Students (those in Elementary School, Middle School, High School and College)
- Families with multiple members on the trip
- Individuals in need of extra financial support

**Do any of these apply to you? If so, which one(s)?**

**Please describe the steps you are taking to meet the financial requirements of this trip.**

**TRAVEL INSURANCE**

Lebanon Presbyterian Church may purchase traveler’s insurance on your behalf if applicable. Please list your beneficiary for this purpose below.

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

**PASSPORT**

For international trips only. If you do not have a passport or are applying for a passport, please enter APPLYING in place of your name.

Name (as it appears on your passport): \_\_\_\_\_

Passport Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_

Nationality: \_\_\_\_\_ Place of Issue: \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_

## TRIP AGREEMENT

In submitting this application:

- I am expressing my agreement with LPC's Vision, Mission, and Core Doctrines
- I am willing to work under the direction of the Team Leader and Field Partners to accept and to perform any and all assignments with a God-honoring attitude.
- I am willing to conform to the standards of the local Christians, even if those standards are stricter than my own.
- I agree to be subject to a background check.
- I am confirming that I have the time and energy to devote to the pre, mid, and post-trip responsibilities.
- I agree to participate in the training and team meetings arranged by the mission committee and team leader and complete all requirements for the trip.
- I agree to return home at my own expense if the Field Partner, in conjunction with the mission Team, determines my behavior is/has been inappropriate and therefore jeopardizing the long-term ministry.
- **I acknowledge that LPC will not be responsible for extra trip expenses (i.e., airline, hotel, etc.). Should these occur, they will be passed along to the traveler.**
- I understand that my involvement on this Project can be denied prior to travel if I do not participate in the full preparation of the Project.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Don't forget to print and complete the Medical Release Form before you submit the form.**

**Other Forms:**

**Mission Trip Medical Release Permission to Treat Form**