



Global Trip Application

General Information

Trip Destination: _____

Name as it appears on Passport: _____

Name you prefer to go by: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Phone (home): _____ (cell): _____

Gender: _____ Male _____ Female

Date of Birth: _____ Age: _____

Country of Citizenship: _____

Emergency Contact

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Relationship to you: _____

Insurance

Medical Insurance Company: _____

Phone Number for International Contact: _____

Policy Number: _____

Primary Physician: _____

Phone Number of Physician: _____

* Responses to the following questions do not prohibit you from participating. Some questions may be discussed at your personal interview.

Health | Medical

* You may be required to provide a doctor's letter of release/consent in order to participate.

Please provide your blood type: _____

Describe your health and fitness (choose one):

____ Excellent ____ Average ____ Good ____ Below Average

Please check all that apply. In the past year, I have had:

____ Fainting Spells ____ Diabetes ____ Seizures
____ Heart Problems ____ Respiratory Problems ____ Eating Disorder
____ Fear of Flying ____ Anxiety/Depressions ____ Sleep Disorder
____ Mobility Limitations ____ Reading/Comprehension Limitations
____ Claustrophobia ____ Fear of Heights

Other (please specify): _____

Please disclose any known medical conditions and/or limitations, including chronic illnesses or allergies you've had in the past two (2) years: _____

List all current medications prescribed by a physician: _____

Provide any psychiatric care or treatment you've undergone in the past two (2) years: _____

Passport

Provide a copy of your passport with your application.

If a new passport needs to be acquired, begin the process in the near future and provide a copy of passport when it arrives.

Note: a valid passport requires the expiration date be more than six (6) months from day of departure.

Spiritual

Home church name & length of time you've attended: _____

List your involvement at your home church: _____

List your Spiritual Gifts: _____

Describe how and when you became a Christ-follower: _____

Have you been water baptized: Yes No

If yes, provide when & where: _____

Provide why you want to be a part of this trip: _____

Describe your personal expectations for this trip and what you feel would make this successful for you: _____

Have you ever served on a mission trip or had cross-cultural experience?

Yes No *If yes, provide when and where:* _____

Provide name of church/organization: _____

Mission/Trip Focus (check all that apply):

Construction/Building Inner-city/Street Outreach Disaster Relief

Evangelism Tour/Study Other: _____

Personal

Check all that apply:

Introvert Perceptive Decisive Fact Oriented

Intuitive Intellectual Extrovert Feeling

Other: _____

Rate the feelings of your family members on your participation on this trip:

Enthusiastic Supportive Skeptical Negative

List the most significant events that have occurred in your life in the past two (2) years:

Describe your strongest character quality and explain why: _____

Questions or concerns regarding this trip that you would like answered: _____

I have been involved with the following in the past year:

Alcohol Tobacco Illegal Drugs

Occult Criminal Activity Homosexuality

Please explain if you checked any of the above: _____

I have been convicted of a crime: Yes No

If yes, please explain: _____

Skills | Experience

List language(s) other than English that you speak fluently: _____

List any professional certification(s) you have acquired: _____

Check all that applies to you (skills, talents, experience, training):

- | | | |
|--|---|---|
| <input type="checkbox"/> Disaster Relief | <input type="checkbox"/> First Aid/CPR | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Sports | <input type="checkbox"/> Art | <input type="checkbox"/> Crisis Counseling/Biblical |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Musical | <input type="checkbox"/> Vacation Bible |
| <input type="checkbox"/> Missions training | <input type="checkbox"/> Instrumental/Vocal | <input type="checkbox"/> School/Children's Ministry |

I am currently (check all that apply):

- | | | |
|--------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Plane Owner | <input type="checkbox"/> Roofer | <input type="checkbox"/> Policeman |
| <input type="checkbox"/> Fireman | <input type="checkbox"/> Pilot | <input type="checkbox"/> Construction/Laborer |
| <input type="checkbox"/> Doctor | <input type="checkbox"/> Paramedic | <input type="checkbox"/> Plumber |
| <input type="checkbox"/> Carpenter | <input type="checkbox"/> Nurse | <input type="checkbox"/> Electrician |

Other (please specify): _____

References

Pastor/Church leader that will be a reference for you:

Name: _____

Phone: _____

Name two (2) people who know you and your spiritual walk:

Name: _____ Phone: _____

Name: _____ Phone: _____

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Immunizations

See <http://www.cdc.gov> for immunizations **recommended** by the Center for Disease Control. Given that the Center for Disease Control may not require any vaccinations, Journey Church cannot mandate individual team members be immunized; therefore, each team member must make his/her own decision regarding their health and wellbeing.

_____ By placing my initials on this line, I acknowledge that I have been informed of the Center for Disease Control's immunization recommendations.

The undersigned, (the individual, including the individual's parents or legal guardians, if under 18 years of age listed in Section 1), (hereinafter the "Participant") in consideration of my participation in the Journey Church Kingdom Builders Global Trip (hereinafter the "Mission Trip") and the mutual covenants set forth in this Agreement together with other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the Participant, intending to be legally bound for myself, my heirs, assigns, executors, and administrators, does hereby waive and release, assume all risks, and agree to indemnify and hold harmless Journey Church and its officers, staff, volunteers, or representatives and assigns (hereinafter "Journey Church") from and against any and all claims for death, personal injuries or property damage, costs, expenses and actions of any kind whatsoever, arising out directly or indirectly out of my participation in the Mission Trip, including without limitation liability arising out of negligence or carelessness on the part of Journey Church.

The Participant has voluntarily chose to participate in the Mission Trip and to be involved in outreach to others by seeking to meet their physical and spiritual needs. The Participant assumes all risk and responsibility for any damage or injury to their property or any personal injury which the Participant may sustain while involved in the Mission Trip, including any related medical costs and expenses.

The Participant understands that this short-term Mission Trip entails risk of physical injury and may involve extreme climates, adverse working conditions, hard physical labor and exposure to potentially dangerous areas of the world. The Participant certifies that he or she is in good health and physically able to perform this type of work. Journey Church requires all Participants to be in good physical condition, and may require the Participant to obtain a doctor's exam and prior written approval to participate on the Mission Trip.

The Participant hereby authorizes Journey Church or its representatives to act for the Participant in their best judgment and in any emergency requiring medical attention. All medical expenses incurred will be the responsibility of the Participant or the

Participant's family. The undersigned certifies that the Participant has no physical condition or mental impairment that would be effected by their participation in the Mission Trip. If the Participant is a minor child and the undersigned cannot be reached in an emergency, the undersigned grants permission to any licensed physician, surgeon, clinic, or hospital to secure proper treatment and to order anesthesia, if medically required.

Journey Church will arrange for Participant's accommodations and the Participant understands that Journey Church is not responsible or liable for Participant's personal effects and property and that Journey Church will not provide lock up or security for any personal property belonging to the Participant during the Mission Trip. The Participant further agrees to abide by whatever rules and regulations may be in effect for the accommodations during the Mission Trip.

Journey Church requires strict compliance with rules and regulations, including the rules concerning conduct, dress, and Christian lifestyle. These are explained in the Team Covenant, which will be provided to the Participant and which Participant agrees to be bound upon acceptance of this Agreement. If a Participant is declined from participation on the Mission Trip, the application fee will be refunded. Failure by the Participant to comply with this Agreement, the Team Covenant or any other rules and procedures related to the Mission Trip are grounds for dismissal, without refund or reimbursement. Should a Participant choose to cancel the trip or is dismissed, all application fees and all sponsor funds received by Journey Church will be deemed contributions and are not refundable.

To receive tax deduction, the IRS regulations stipulate that the donor must release control of all funds donated to a non-profit organization. For this reason, contributions from sponsors cannot be refunded, nor can they be designated to any specific person. Participants may raise funds and receive credit for these funds equal to the price of his or her trip, less the trip deposit which must be paid by the Participant personally. Each Participant's trip cost must be paid in full prior to departure. Lack of payment could result in denial of Participant's attendance on the Mission Trip.

The parties to this Agreement are Christians and believe that the Bible commands them to make every effort to live at peace and to resolve disputes with each other in private or within the Christian church (Matthew 18:15-20; 1 Corinthians 6:1-8). Therefore, the parties agree that any claim or dispute arising from or related to this Agreement shall be settled by Biblically-based mediation and, if mediation is not successful, legally binding arbitration in accordance with the Rules of Procedure for Christian Conciliation of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text of the Rules is available at www.peacemaker.net). The parties shall adhere to the Rules, except that the parties agree to select only one arbitrator and agree to hold any such mediation or arbitration in Kenosha County, Wisconsin, at a mutually agreed location. (If the parties cannot agree on a mediator, arbitrator, or location within Kenosha County, Journey Church shall name three persons or location and Participant Journey Church // Kenosha // Beach Park // Burlington | 10700 75th Street | Kenosha, WI 53142

shall choose from those three). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and THE PARTIES EXPRESSLY WAIVE THEIR RIGHT TO HAVE CLAIMS ARISING FROM THIS AGREEMENT ADJUDICATED IN A CIVIL COURT, except to enforce an arbitration decision.

PLEASE CONFIRM YOUR INTENT TO BE BOUND BY THE ABOVE MENTIONED TERMS. BY SELECTING "I ACCEPT," YOU ARE ENTERING INTO A BINDING CONTRACT/AGREEMENT WITH THE CHURCH.

I Accept I Decline

Applicant Signature: _____

Print Full Name: _____ Date: _____

Note: Parent/Legal Guardian is required to sign if Participant is under 18 years of age. See attached consent form for minors.