

WAKEFIELD BAPTIST CHURCH
SHORT TERM MISSIONS TRIP APPLICATION

Turning in an application does not guarantee you a position on this trip

Application must be completed in its entirety!

Destination: _____ Dates: _____

*Important: Please attach a copy of your passport with your application.

*If you have any questions about the application or the trip you are applying for,
please contact Josh Branum, jbranum@wakefieldbaptist.org.

PERSONAL INFORMATION

Name: _____ Date: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Other Phone: _____

E-Mail: _____

Gender: Male Female Date of Birth: _____

Citizenship: _____ Country of Birth: _____

Marital Status: Single Married Divorced Widow(er)

Spouse's Name: _____

Children's Name(s)	Age	Gender
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PASSPORT INFORMATION

Name (as it appears on Passport): _____

Passport Number: _____ Date of Expiration: _____

Date and Place of Issuance: _____

CHURCH INVOLVEMENT

How long have you attended Wakefield? _____

Are you a member of Wakefield? Yes No

If yes, when did you join? _____

If not, are you a regular attendee? Yes No

Do you regularly attend a Sunday School class? Yes No

Which one? _____

In what other ministries do you currently serve in at Wakefield?

Ministry participation (Areas of involvement, length of participation, leadership positions held, training & certification, etc):

What is your current occupation (i.e. Student, Business, Media, etc.)?

MEDICAL INFORMATION

State of present health? Excellent Good Average Poor

List any health conditions:

Physician's Name: _____ Phone Number: _____

Designated Beneficiary: _____ Relationship: _____

Are you currently under the regular care of a physician? Yes No

If yes, please explain reason:

List all medications you are currently taking:

List any allergies or physical difficulties, which might affect your involvement:

EMERGENCY CONTACT

In case of emergency, please notify:

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

MISSIONS EXPERIENCE

Date and location of previous mission trips:

All other travel experience:

Activities most interested in:

Foreign Language(s): _____

Proficiency: _____

Other mission organizations worked with:

SKILLS

Talents/Gifts/Skills (We can use them all to serve the nations!):

PERSONAL TESTIMONY

Please relate to us the story of your salvation experience. (Attach extra pages if needed.):

PERSONAL **TESTIMONY** continued

How is God at work in your life now?

Tell us more about your passions, talents, work experiences, unique skills, cross cultural experiences & anything else that has shaped who you are.

What have been some of the defining moments of your life?

Have there been any recent traumatic (emotional, physical, or spiritual) experiences in your life that we should know about? Please explain:

What is your family's attitude toward your interest in mission?

Who are two people aware of your desire to get involved in missions?

WHY THIS TRIP?

What do you believe is the biblical purpose/goal of global "missions?"

Why/how do you feel God is leading you in this trip?

What would you say to someone who wants to know WHY he/she should become a Christian? (Include scripture references)

What would you say to someone who wanted to know HOW to become a Christian? (Include scripture references)

How would you take your host culture and country, the place you are at, and the person you are sharing with into consideration when you are sharing Christ with someone? How would you be culturally sensitive to these types of situations and issues?

Please describe any current and previous experience working with others on a team. Include roles you tend to take in team efforts, and what you see as your strengths and weaknesses when working with others.

REFERENCES

Provide two personal references. One should be from your **Sunday School Teacher** or **Leader of Ministry** in which you are involved. The other reference should be from someone who knows your personal spiritual walk and your specific ministry abilities.

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

E-mail: _____

COMMITMENT

If selected as a member of this team, I make a commitment to:

- Faithfully go through the training process prior to departure and after I return from the trip
- Raise the necessary prayer and financial support
- Submit to the trip leader's and the host on-the-field's authority
- Conduct myself in a manner worthy of the Lord while serving Him on the project
- Refrain from any behavior which may compromise my witness

Additionally, if at any time while on the project my behavior constitutes a problem, the team leader has the authority to ask me to return home. Any additional cost incurred because of this action will be at my cost.

I certify that I have appropriate medical insurance for foreign travel. Should any illness or medical emergency be required, I agree to pay all medical expenses in excess of the amount provided by any applicable insurance policy.

Lastly, I hereby agree to raise my own support before the mission trip. I understand that the costs and fees could change due to the continually changing rates of transportation, fees, supplies, etc. I understand that Wakefield Baptist Church and/or the Missions Committee do not have the funds to purchase trip components for me in advance.

I understand and agree that Wakefield Baptist Church, its staff, or other representatives assume no responsibility for the loss of property, damage to the same, personal harm, illness, or loss of life, that may occur during the execution of this volunteer mission project; and I, for myself, my heirs, executor, administrators, distributes, and assigns, in consideration of my admission to volunteer service and other good and valuable considerations, do hereby absolve said Wakefield Baptist Church, sac and hold them harmless from any claim or demand which I or they might conceivably assert upon the basis of the foregoing. I understand that I will be under the policies of Wakefield Baptist Church and my field supervisor. I agree to abstain from the use of tobacco products, alcoholic beverages, illegal drugs, and any other behavior that would hinder Christian ministry. I understand that the breach of this contract will cause for dismissal from the volunteer project and return home at my own expense.

Participant Signature: _____ Date: _____

FOR MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS ONLY:

Parents' Names: _____

Signatures: _____ Date: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

Please return this application to Josh Branum on or before the trip application deadline by doing one of the following:

1. Drop it off or Mail it to: 13029 Keith Store Rd, Wake Forest, NC 27587
2. Faxing it to: (919) 570-0803 Attn: Josh Branum
3. Scan and sending it to: jbranum@wakefieldbaptist.org

Office Use Only:

Date received: _____

WAKEFIELD BAPTIST CHURCH
13029 KEITH STORE RD
WAKE FOREST, NC 27587
(919) 570-5777