



Mountain View family church

APPLICATION FOR SHORT-TERM TEAMS

Mission Information

The Mission Trip You are Applying for: _____

Personal Information

Legal Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone:_(_____) _____ eMail: _____

Sex M ___ F ___ Marital Status: Married ___ Single ___

Date of Birth: _____

Citizenship: _____ Country of Birth: _____

Passport Number: _____ Date of Issue/Expiration _____

Spouse's Name: _____

Emergency Information

In case of emergency, please notify: Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone:_(_____) _____ Relationship: _____

Medical Information

Name of Medical Insurance Company: _____

Coverage Group #: _____

Insurance Phone #: (____) _____ Policy Holder Name: _____

Does your insurance cover you overseas? Yes ___ No ___

*If no, please state which insurance plan will cover you overseas. You will not be able to attend the trip without international insurance coverage.

Allergies & Drug Allergies: _____

Blood Type: _____

Current Medications: _____

Any medical conditions that need to be noted: _____

Personal References

Name: _____ eMail: _____

Relationship to you: _____
(i.e. pastor, manager, leader, etc.)

Name: _____ eMail: _____

Relationship to you: _____
(i.e. pastor, manager, leader, etc.)

Please indicate any special skills, talents, or service experience that you feel may be helpful in Uganda.

Please list previous missions experience:

Country	Missions Organization	Dates	Tasks
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Are you a current member of Mountain View Family Church? Yes ___ No ___

Briefly describe your current relationship with the Lord:

Participation Agreement

Project Description: _____

Location: _____ Dates of Trip: _____

I agree to release, discharge, and hold harmless, Mountain View Family Church, its employees, agents, and members from any and all claims or demands due to personal injury, illness, or death as well as any and all property damage sustained of any nature which may be incurred by m, whether in foreign or domestic territory, while participating in the above described event or activity. I also agree to be directed by and responsible to the designated leadership for this short-term project. Further, I agree to hold harmless and to indemnify Mountain View Community Church as a result of my participation.

Signature: _____ Date: _____

