

## ***General Mission Trip Considerations***

For each mission trip, the 'Invitation to Mission' (below) will be determined by the Mission Committee and disseminated to the congregation.

Also, the following forms will be completed by each candidate. In addition, candidates will attend the team meetings preceding the trip. The Mission Committee will prayerful consider each candidate.

### ***Leadership***

Mission Trip Leaders should be persons of faith, dedication, good judgment, and love of Jesus Christ as Savior and Lord. Their manner of life should be a demonstration of the Christian gospel, both within the church and in the world.

### ***Mission Trip Levels***

Mission Trips vary widely in physical and spiritual intensity. Not all trips are for all people.

Some trips are for those who have never been on a Mission Trip;  
they are an ***Entry Level Mission Trip***.

Some trips are equally for service and spiritual growth;  
they are a ***Moderate Level Mission Trip***.

Some trips are mostly for a specific purpose or out of the United States requiring spiritual maturity and particular skills;  
they are an ***Extreme Level Mission Trip***.

## ***Invitation to Mission Growing in Christ through Mission***

Where:

When:

Expectations: What will team members need to do? What will be some of the challenges that may exist? (food, weather, endurance)

Purpose & Plan: A list of intents, goals, and tasks

Size of Team and Participation: How many people and select a level from the list.

Special Qualifications sought: List special needs for trip (Language skills, construction, work with children)

Age range:

Cost:

Important Dates and deadlines:

**(Trip year and Destination) Mission Trip Participant Release Form**

(To be filled out by both Youth and Adults)

Name of Participant (please print) \_\_\_\_\_

Liability Release Form: I/we understand that there are inherent risks involved in any mission trip, and I/we hereby release First Presbyterian Church and Lindsey Presbyterian Church, its staff and volunteer workers from any and all liability due to any injury, loss or damage to person or property that may occur during the course of my/our involvement with this mission trip.

Medical Release Form

I/we the undersigned have given our consent, in the event that I/he/she is injured while attending the trip and require the attention of a doctor; I/we consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is called for, which a physician and/or hospital personnel refuses to administer without my/our consent, I/we hereby authorize \_\_\_\_\_, the lead adult of our group, or a member of the First Presbyterian Church staff to give such consent for us if I/we cannot be reached. In the event it becomes necessary for that person to give consent for us, I/we agree to hold such person free and harmless of any claims, demands or suits for damages arising from the giving of such consent so long as the treatment is administered by or under the supervision of a licensed physician. I/we also acknowledge that I/we will be ultimately responsible for the cost of any medical care should the cost of that care not be reimbursed by the health insurance carrier. Further, I/we affirm that the health insurance information provided below is accurate at this date and will, to the best of my/our knowledge, still be in force for the participant named above at the time of the mission trip.

Participant Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_

Date of Last Tetanus Shot \_\_\_\_\_  
Known Allergies \_\_\_\_\_

Current Medications or Health Conditions \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Please attach a copy of you insurance card to this form.

Emergency Contact Information (Please indicate this person's relationship to participant)

1) _____	2) _____
Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____

Insurance Information

Name of health insurance company  
\_\_\_\_\_

Health insurance policy number  
\_\_\_\_\_

Phone/address of health insurance company  
\_\_\_\_\_

Name of policy holder  
\_\_\_\_\_

Policy holder's phone number  
\_\_\_\_\_

Participation on this trip is contingent upon compliance with all the policies stated in this form.

Participant Liability  
Medical Release Form

Participant (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (1) (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian (2) (Print) \_\_\_\_\_  
(Signature) \_\_\_\_\_ Date \_\_\_\_\_

\*If the participant is older than 18 years, no Parent/Guardian signatures are necessary.

***(Trip year & Destination) Trip Covenant***  
***1<sup>st</sup> Presbyterian Church Anderson, Indiana***

Name \_\_\_\_\_ Birth date \_\_\_\_\_

Destination -  
Travel Times –

During this journey together we will do our best to be together as a family in Christian community. Family life is based on love, respect, trust, support, and spending time together. Each member of our family is a child of God and very important to our community. To create and maintain this Christian family/community I agree to:

1. Participate as fully as I am able in the event program. I will cooperate in group activities, be on time for program events, and focus on the program.
2. Be respectful to fellow travelers both youth and adults and to myself by obeying behavior requests by the adult leadership provided by the church and respecting them as parents. I will also show respect for and obey authorities at the event site.
3. Guard the safety of everyone in the group by avoiding any unplanned hazardous activity and following safety rules. I will do my best to make travel safe. I agree not to leave the group alone for any reason and to tell someone before going anywhere in a group. I will report any injuries to myself or to others.
4. Abstain from using any illegal substances or alcohol while on this trip. I will use my words to encourage and build others up and will not use offensive or defamatory language. I will use my best manners so I will not offend anyone.
5. I will be respectful of others in my expressions of care, concern, and intimacy.
6. I will be responsible for my own belongings and respect the property of others.
7. Allow enough rest for myself and others to fully participate in planned activities by abiding by lights out and quiet times established for this event. It is especially important for the safety of the entire group that the adults with driving responsibilities be well rested.

**I recognize that I am joining this Christian family/community. I agree to abide by this covenant while I am a member of this community. I understand that if I break this covenant that I may be asked to leave at my own expense and/ or that I may be denied future travel opportunities with this church.**

*On the reverse side, please write a brief description of your journey of faith.*

Participant signature \_\_\_\_\_

Parent / Guardian signature \_\_\_\_\_