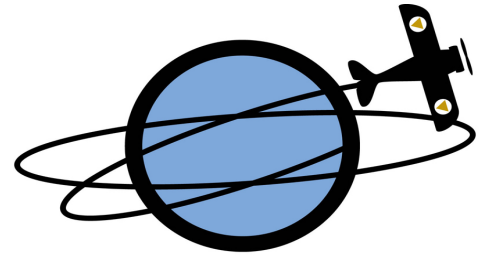


Application Form 2017



MISSION
TRIPS

↪ You pay this amount! *

✓ Select Your Trip	2017 SUMC Mission Trips	Trip Dates	Participant Age Require- ment	Total Trip Cost	Partici- pant Cost	Non- refundable Deposit	Deposit & Application Packet Due Date	Final Payment Due	Min/Max Team Size
	Habitat for Humanity Canton, OH	July 9-15	14+ or 6+ w/ parent	\$200	\$120	\$60	1/31/17	6/1/17	20/25
	Bennettsville, SC	July 22-29	14+ or 6+ w/ parent	\$300	\$145	\$75	3/31/17	6/1/17	10/15
	Costa Rica Mis- sion Project	July 29-Aug 5	18+ (College/ Adult)	\$1,110	\$800	\$300	3/31/17	6/15/17	8/10
	Red Bird, KY	Aug 6-12	12+ or 6+ w/ parent	\$450	\$225	\$110	3/31/17	7/1/17	17/20
	Highlands, NC	Sept 28-Oct 2	18+	\$110	\$60	\$60	9/1/17	9/1/17	5/6

Note these critical dates ! ↪

- All trips are filled on a **first-come basis**. Your spot is held when your application and deposit are received. If you have to drop out of a trip after the application deadline, your deposit will not be refunded. If you are not accepted to a trip, or if the trip is cancelled, your deposit will be refunded.
- * **Mission trip fundraisers** subsidize a significant portion of the total trip costs. Therefore, participation in mission trip fundraisers is required. A minimum of 5 hours of service must be logged during any of the mission trip fundraisers. If 5 hours of service are not performed, the trip deposit will not be applied to the trip balance, and the participant will still be responsible for the full participant cost. If 5 hours of service are performed, the deposit will be applied as a payment toward the participant cost. It is the responsibility of the participant to sign the attendance sheet at fundraisers.
- **Minimum age** requirements are as listed. Some trips are for adults only. For trips that allow children, the minimum participant age is 6 years, and children under age 12 must be accompanied by parent or legal guardian.
- **Fundraiser dates:** Blue Envelope Project— March or April
Car Wash—Early June
Rummage Sale Sorting and Pricing—June 4-23
Rummage Sale—June 24-25



Sterling United Methodist Church
Iglesia Metodista Unida Sterling
304 East Church Road
Sterling, VA 20164





SUMC Mission Trips 2017 Application



All Applicants

First Name: _____ Middle Name: _____ Last Name: _____ Suffix: _____

Preferred Name: _____

Address: _____

Current Grade (if student): _____ Age (on first day of trip): _____ Birth Date: _____

Email Address: _____ T-Shirt Size: _____

Telephone Number: _____ Cell Phone : _____

International Applicants

Do you have a valid passport? Yes No Expiration Date _____

Are you an American Citizen? Yes No If no, what is your citizenship? _____

Application Checklist:

- Application /Medical Form
- Copy of Passport (International Teams only)
- Non-Refundable Trip Deposit
- Copy of Driver's License (Adults 21+ Only)
- Copy of Health Insurance Card
- Background Check Authorization (All adults 18+ by last day of trip)

If we have your driver's license, passport, or background check on file from last year's trip, you need not re-attach them if they are still current and accurate. Copies may be made in the church office.

To be placed on a mission team, you must turn in the completed application and non-refundable trip deposit. Note, the deposit will be refunded if the application cannot be accepted (either because the team is full or the applicant does not meet the trip requirements).

For Office Use Only:

Date Received _____

Trip Assignment _____

Payments: Deposit: _____

Payments: _____

- Application / Medical Form
- Insurance Card
- Passport
- Host Form(s)
- Worksite Guidelines
- License (Exp. Date _____)
- Background Check (Date: _____)
- P/C Cross-Check



SUMC Mission Trips 2017 Application



All Applicants

All Applicants: Please write a brief paragraph explaining why you wish to participate in this trip.

Previous Mission Trips Attended: Year: 2016 Location: _____
Year: 2015 Location: _____ Year: 2014 Location: _____
Year: 2013 Location: _____ Year: 2012 Location: _____
Other _____

Construction or Other Relevant Experience:

Adult Participants Only

Adult Applicants: Please answer the following:

Domestic:

Would you be willing to be a worksite coordinator? Yes No
Would you be willing to drive a vehicle? Yes No
Do you have a vehicle we can use on the trip? Yes No
If yes, how many seats (with seatbelts) are available (total, including the driver)? _____
Would you be willing to serve as the meal coordinator? Yes No
Would you be willing to serve as campsite steward? Yes No

All Adults:

Have you received UMVIM Team Leader Training? Yes No Date: _____
Do you have first aid or CPR training? Yes No Date: _____
Would you be willing to lead worship? Yes No
Would you be willing to lead worship music? Yes No
Would you be willing to take photos? Yes No



SUMC Mission Trips 2017
Medical Information and Release



Name of Insurance _____ ID Numbers _____
 Name of Primary Care Physician _____ Phone Number _____
 PCP's Address _____

Medication(s)

Name _____	Dosage _____	Frequency _____
Name _____	Dosage _____	Frequency _____
Name _____	Dosage _____	Frequency _____

Special storage of medication or other instructions _____

Food/Medical Allergies, Special Conditions, Contact Lenses or Glasses: _____

For applicants who are minors (Under 18 years old on the first day of the trip):

Name of Father or Guardian _____ Phone # _____
 _____ 2nd Phone # _____

Name of Mother or Guardian _____ Phone # _____
 _____ 2nd Phone # _____

All Applicants: Emergency Contacts: (Different from parents listed above)

First Contact: _____ Relationship _____
 Phone # _____ 2nd Phone # _____

Second Contact: _____ Relationship _____
 Phone # _____ 2nd Phone # _____

All Applicants: Please sign and date after reading the following statements.

By participating in this trip, I recognize that I am representing Sterling United Methodist Church. I will conduct myself in a manner worthy of this mission, and in keeping with the highest standards of conduct. I understand that I am called to serve others and to participate fully in the activities and responsibilities of our group.

Parent/Guardian of Minor Applicant (under 18):

The applicant has permission to travel with the Sterling United Methodist Church (SUMC) "Mission Trips 2017." In the event of an emergency, I give permission to the adult members of the group to seek medical attention for him or her. I understand that every effort will be made to contact the parent/guardian as soon as possible in the event of such an emergency. During the Mission Trip, I authorize the SUMC Team Adults to administer medication to the minor listed below in accordance with the physician's instructions as indicated.

Signatures

Signed _____ Date _____
Trip Applicant

Signed _____ Date _____
Parent/Guardian if applicant is under 18