

# BCBC Short Term Missions Trip Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Age: \_\_\_\_\_

Trip: \_\_\_\_\_ Dates: \_\_\_\_\_

Health Conditions & Medications: \_\_\_\_\_

Health Insurance Company and Policy Number: \_\_\_\_\_

**\*\*Please attached a copy of your insurance card (front and back) with your application.\*\***

BCBC Member? Yes / Nolf not BCBC, where? \_\_\_\_\_

1. Describe how you became a Christian. \_\_\_\_\_

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2. What is the main reason you are applying to go on this trip? \_\_\_\_\_

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3. What do you hope to receive from this experience? \_\_\_\_\_

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4. What experiences, gifts or abilities do you provide the team? \_\_\_\_\_

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5. Please describe your current involvement in your local church. \_\_\_\_\_

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6. Have you ever traveled outside of the USA? Yes / No To developing countries? Yes / No

To what countries? \_\_\_\_\_

7. If you have participated in previous trips, list the place/country and date.

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8. What would your close friends say are your 3 major strengths and weaknesses?

Strengths

Weaknesses

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Are you willing to:

Submit to the leadership of this mission team? Yes / No

Complete the required preparation assignments? Yes / No

Participate in planning and training activities? Yes / No

Respect as Brothers and Sisters in Christ the local Christians with whom you may work? Yes / No

Be flexible and open to the way in which God (and the mission team) will use you on the trip? Yes / No

If driving, to promise to obey speed limits & other traffic laws? Yes / No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_