APPLICATION

SECTION 1: GENERAL INFORI	MATION							
Trip Destination:		Date:						
Full Legal Name:		Last:						
Date of Birth:		Age:						
Gender:		Home Phone:						
Address:	Cell Phone:							
City:	E-Mail:							
State:	Passport #:							
Zip:	Passport Expiration Date:							
Birthplace	Agency Issuing Passport							
T-Shirt Size: (please check age and size)	() Youth	() Adult	S	М	L	XL	2X	3X
Important : You need to have a pas not yet have a passport, you need t					R the e	end of	the trip.	If you do
SECTION 2: HEALTH INFORMA	ATION							
Present health: (please check)	Excelle	ent (Good	Fair		Poo	r	
Are there any physical limitations or	r medical re	strictions th	at we s	hould kno	ow abo	out?		
List any known allergies to Medicati	ions, foods,	insect bites	s, etc.?					

Has any allergic reaction ever required emergency medical care?				
Do you have any recurring health pr	oblems?			
Please list any current medications	you are taking.			
Family Physician:	Phone #:			
Health Insurance Company:	Policy #:			
SECTION 3: EMERGENCY INFO	ORMATION			
Name:	Relationsh	nip:		
Cell Phone:	Day Phon	e:		
Name:	Relationsh	nip:		
Cell Phone	Day Phon	e:		
SECTION 4: CHURCH INVOLVE Riverbend Church Membership: (Circ	cle appropriate answer)	Occasional Occas		
Member	Regular Attendee	Occasional Guest		
Have you attended a small group in	the past year?			
If not Riverbend, where do you atter	nd church regularly?			
In what church activities are you reg	jularly involved?			

SECTION: CHRISTIAN EXPERENCE

How and when did you receive Jesus as your Savior (use additional sheet if necessary)?			
Describe your growth in Christ and what He n	neans to you (use additional sheet if necessary)?		
SECTION 6: SKILLS AND GIFTEDNESS	3		
Have you been on a mission's trip before?			
If so, when and where?			
Why do you want to go on this trip?			
What languages other than English do you kr	now?		
What is your skill level with the above language	ges? (Circle appropriate answer)		
Speak fluently	Speak some		
Read fluently	Read some		
Write fluently	Write some		
Describe your areas of giftedness, abilities, sl mission trip (construction, medical, drama, da	kills, or experience that could be utilized on a short-term ince, guitar, balloon animals, etc.)?		

SECTION 7: CONSENT FOR MEDICAL TREATMENT

Signature

I wish to participate in a Riverb	end Church short term mission trip for which	I will be traveling to and staying in		
(country)		during the period from		
(month and day)	to (month and day)	, (year)		
In consideration of permission	to participate in this trip, I,	, being of		
legal age, do hereby authorize	any necessary medical and/or dental treatme	ent on my behalf or on behalf of my		
minor child (minors name if ap	plicable)	, should I be unable to		
give such consent. This conse	ent includes reasonable medical and/or denta	al treatment, including but not limited		
to diagnostic tests, x-rays exar	minations, anesthesia, or other procedures w	hich may be deemed necessary to		
my medical well being/ the wel	l being of my minor child for the duration of the	he trip.		
Signature	Date			
SECTION 8: RELEASE	AND HOLD HARMLESS FOR TRAVE	EL		
I hereby voluntarily release an	d hold harmless Riverbend, their officers, age	ents, and employees, from all manner		
of suits, actions, claims, dema	nds, and liabilities which may arise from my p	participation/the participation of my		
minor child in this trip. I author	rize the designation leader of the trip to arran	ge for my/my minor child's premature		
home should this be deemed r	necessary. <i>I understand that this will be at m</i>	y own expense should the reason be,		
as concluded by the trip leade	r, my/my minor child's inability to work togethe	er with the team in an appropriate		
manner or continued/extreme	misconduct.			
I recognize that conditions in s	ome of the places to which I/my minor child v	will travel may not be of the same		
standard as the conditions to v	which I am accustomed (i.e. political governm	nents and judicial systems). I further		
realize that there may be certa	in health and detainment risks as well as other	er known and unknown risks to me/		
my child, and I enter/allow my	minor child to enter into participation in this tr	rip with knowledge of this.		
I understand that this documer	nt constitutes a full and complete waiver of all	I possible claims, including claims for		
negligence in personal injury o	r property damage, arising out of my participa	ation/the participation of my minor		
child in this trip.				

Date

Please read and understand the following statements:

In submitting this application I realize that the following elements are crucial to the effectiveness, quality, and safety of our campaign together.

As a member of the mission's team, I agree to:

- Remember that I'm a quest working at the invitation of a missionary and/or local pastors and leaders:
- Respect the host's view of Christianity. Recognize that Christianity has many faces throughout the world, and that the purpose of this trip is to witness and experience faith lived out in a new setting.
- Develop and maintain a servant's attitude toward all nationals and my teammates.
- Respect my team leader(s) and his or her decisions.
- Refrain from gossip. You may be surprised at how each person will blossom when freed from the concern that others may be passing judgment.
- Give all credit of accomplishments and favor to God; realize the amazing things God would allow the team to accomplish if we don't mind who gets the credit – for He deserves all the Glory.
- Refrain from complaining. Know that travel can present numerous unexpected and undesired circumstances, but the rewards of conquering such circumstances are innumerable. I will be creative and supportive.
- Respect the work that is going on in the country with the particular church(es) or person(s) with whom
 we are working. Realize that our team is here for just a short while, but that the local church is here for
 the long term. You are to respect their knowledge, insights, and instructions.
- Remember not to be exclusive in my relationships. If my sweetheart or spouse is on the team, we will make every effort to interact with all members of the team, not just one another.
- I agree to be flexible and serve in whatever service area is allowed and open to me on the mission field.

Signature	Date	

PLEASE RETURN completed application to the welcome desk.

If you wish, you may scan and send completed application to the Riverbend Missions Team at: info@riverbendchurch.church