



MISSION TRIP APPLICATION

_____ (destination)

LEGAL NAME: _____

NICKNAME _____ T-SHIRT SIZE _____ E-MAIL _____

ADDRESS _____ CITY/STATE/ZIP _____

HOME PHONE _____ MOBILE _____ WORK _____

PASSPORT NUMBER (if flying) _____ BIRTH DATE _____

PASSPORT ISSUE DATE _____ PASSPORT EXPIRATION DATE _____

SOCIAL SECURITY NUMBER _____ (used for background checks if applicable)

SPONSORED CHILD NAME & ID NUMBER (if applicable) _____

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NUMBERS: HOME: _____ CELL: _____

EMAIL: _____

Please complete the following questions. Return with copy of passport attached.
Additional paperwork may be required.

MEDICAL HISTORY:

DO YOU CURRENTLY HAVE ANY MEDICAL LIMITATIONS, including DIETARY RESTRICTIONS (list all)?

LIST ANY MAJOR SURGERIES IN YOUR MEDICAL HISTORY:

LIST ALL MEDICATIONS CURRENTLY TAKING:

DO YOU HAVE ANY ALLERGIES? (FOOD, DRUGS, OTHERS)

PHYSICIAN'S NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

INVOLVEMENT:

HOW LONG HAVE YOU BEEN ATTENDING CITY CHURCH?

ARE YOU CURRENTLY A PART OF A CITY GROUP? IF SO, WHAT GROUP?

ARE YOU CURRENTLY SERVING IN ANY CAPACITY AT CITY CHURCH (INCLUDING LOVE TULSA) IF YES, WHERE?

PLEASE INDICATE ANY SPECIAL SKILLS, TALENTS, ABILITIES, OR EXPERIENCES THAT YOU FEEL MAY BE HELPFUL ON A MISSIONS TRIP:

PLEASE LIST ANY PREVIOUS MISSIONS/OUTREACH EXPERIENCE(S):

YOUR STORY:

PLEASE SHARE YOUR STORY ABOUT HOW YOU CAME TO CHRIST: (USE A SEPARATE PIECE OF PAPER IF NECESSARY)

SHARE ONE THING YOU BELIEVE GOD IS DOING IN YOUR LIFE RIGHT NOW. WHAT IS GOD TEACHING YOU?

BRIEFLY SHARE WHAT YOU DESIRE TO SEE GOD DO IN YOUR LIFE THROUGH THIS MISSIONS TRIP EXPERIENCE:

PLEASE GIVE US THE INFORMATION FOR ONE PERSON (NON-FAMILY MEMBER) WHO CAN BE A REFERENCE IN REGARDS TO YOUR WORK ETHIC AND CHARACTER:

NAME: _____ RELATIONSHIP: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

City Church Tulsa Code of Conduct

I wholeheartedly support the overall mission at City Church and feel called during this season of my life to go on this mission trip. I understand that while on this trip I will be asked to submit to the authority of the City Church staff/leaders. I understand that by going on this mission trip I will be expected to adhere to a biblical standard of conduct both before and during the trip. I also agree to adhere to the following requirements:

- I agree to pursue a biblical lifestyle and will not partake in any conduct that could bring my reputation or character into question. Any sort of questionable conduct will be worked out at the discretion of the City Church staff and could result in removal from the missions team. The City Church staff has the right to remove any team members if necessary (airline deposit cannot be refunded).
- I will not leave my team or the vicinity of our work at all times while on the mission trip unless allowed to do so by a team leader.
- I agree that all contact with members of the opposite sex should be handled with the highest level of integrity so that we stand above reproach in all manners.
- I will not use profanity, alcohol, tobacco, or any type of illegal narcotic while on the trip. There is absolutely NO alcohol allowed while on the trip or in the airport.
- I will remain flexible and open to change throughout the entire trip in case unforeseen circumstances arise.
- I understand that my attitude is a key part of our overall effectiveness on this trip. People with good attitudes make the trip better for everyone. I commit to maintaining a positive attitude no matter the situation.
- I commit to attending all team meetings from now until the trip.
- I understand that by committing to this trip I agree to actively participate in ministry while on the trip. This trip is not for bystanders and is not a vacation. You will be asked to work/lead ministry during the day.
- I agree to pray, prepare, and work hard!
- **Initial if you allow your photo to be utilized in any media or marketing medium including social media. _____**

PRINT NAME HERE: _____

SIGN HERE: _____

DATE: _____

TRIP COST

- **Refer to the payment schedule for your specific destination.**
- **A non-refundable deposit equal to 20% of the total trip cost is required.**
- **There is also a \$100 late fee if deposit is received after due date.**

Assumption of Risk Waiver Form

Note: This form is for use of anyone who participates on short-term missions, outside of our local area. Because City Church may not have insurance to cover injuries or accidents that occur on such trips, we ask members who participate on such trips to assume all risks associated with them as a condition of their participation.

I, _____ (name of individual), in consideration of my acceptance as a short-term volunteer on a trip sponsored by City Church Tulsa represent and agree that:

1. I am a volunteer worker and am not participating on this trip as an employee of the church.
2. I am aware of the hazards and risks to my person and property associated with serving on this trip, such hazards and risks including, but not being limited to, death or injury by accident, disease, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity, and random acts of violence. I accept my assignment with full awareness of these risks of death, injury, and illness associated with such risks, and any damage to my personal property, and I release City Church Tulsa and its agents, officers, directors, and employees from any liability arising as a result of death, injury, or illness that I may suffer as a result of participation on the missions project. I further recognize that such risks have always been associated with missionary service.
3. I attest and certify that I have no medical conditions that would prevent me from any trip activities.
4. I expressly waive any defense to the enforcement of any provision of this commitment arising from a claim of lack of consideration and warrant that this commitment constitutes a legal, valid, and binding obligation upon me enforceable against me in accordance with its terms.
5. I am aware of the hazards and risks to my person associated with participation on this trip, as described above. I further understand that City Church may not have any insurance coverage that would apply in the event of my death, illness, injury, or damage to my property that may occur during my participation on the trip, and that if I desire insurance coverage I am responsible for the cost of such insurance.
6. I expressly agree that this assumption of risk agreement is intended to be as broad and inclusive as permitted by law. I further state that I have carefully read the foregoing assumption of risk and understand its contents, and I voluntarily sign this legal document on my own free act.

Signature _____ Date _____

Printed Name _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Printed Name _____

Address _____

City _____ State _____ Zip _____

Parental Consent Form

For applicants under 18, this signed form must be turned with application.

Full name of Applicant _____

FOR PARENT/GUARDIAN SIGNATURE:

As the parent/guardian of applicant named above, I/we give my/our permission for my/our child to participate on the City Church Tulsa missions trip. I/we agree to be present during all informational meetings. I/We understand that accidents/injury to my/our child or any damage to my/our child's property is a possibility and I/we are aware of the hazards and risks to my child and property associated with him/her serving on this trip, such hazards and risks including, but not being limited to, death or injury by accident, disease, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity, and random acts of violence. By signing below, I/we waive any defense to the enforcement of any provision of this commitment arising from a claim of lack of consideration and warrant that this commitment constitutes a legal, valid, and binding obligation upon me enforceable against me in accordance with its terms.

Please check:

_____ Father / Full Name: _____

_____ Mother / Full Name: _____

_____ Legal Guardian / Full Name: _____

Parent/Guardian signature

Date

Parent/Guardian signature

Date

Parent/Guardian signature

Date