

# FUMC Lakeland Mission Trip Participant Application

This form may be completed on the computer and printed out or e-mailed.

Trip Destination/Date	

Applicant Contact Information:	
Name	
Street Address	
City, State, Zip Code	
Home Phone	
Cell Phone	
E-Mail Address	

Why are you interested in going on this mission trip?
Explain your interest in this mission trip including how you heard of the trip, what makes going on this trip appealing to you, etc.

Previous Mission Trip Experience :
Summarize your previous mission trip experience.

Special Skills or Qualifications:
Summarize special skills and qualifications that are applicable to this trip. Include those you have acquired from employment, previous missions work, or through other activities, including hobbies. Also include spiritual gifts that make you a good candidate for this trip.

<b>Participant Name</b>
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<b>Limitations/Areas of Concern :</b>
Please list anything that might limit you from fully participating in activities before/during/after the mission trip including health concerns, physical limitations, scheduling issues, etc. Also note here if participant costs for the trip would present a financial hardship. Listing limitations here will not keep you from being considered for this trip but will allow the trip leader to be aware of concerns that need to be addressed to allow you to participate fully.

<b>Person to Notify in Case of Emergency (must not be another trip participant):</b>	
Name	
Street Address	
City, State, Zip Code	
Home Phone	
Cell Phone	
E-Mail Address	

<b>Agreement:</b>	
By submitting this application, I am asking to be considered for participation in an FUMC Mission Trip. I understand that if I am accepted as a trip participant, I may be responsible for some trip costs. I agree to participate in pre-trip meetings and activities including fund raising for the trip and will complete a trip evaluation after my trip has returned. I will also be asked to agree to a behavioral covenant agreement and will be held accountable to that covenant by the trip leader(s).	
Date Completed	

**Return this form in person, by e-mail, or by mail to the Church Office.**