

# McAllen 2010



## Short Term Mission Trip Application

Fellowship Bible Church  
5434 East 91<sup>st</sup> Street  
Tulsa, OK 74137

### For Office Use Only

Date Received \_\_\_\_\_  
Status \_\_\_\_\_

Mission Trip Destination McAllen 2010- Jr. High Mission Trip

**\*This application is due on February 7, 2010.**

Note to Applicant: This application is designed to better ensure that you, your team leaders, and our missionary contacts all have a positive missions experience. It is therefore essential that this be completed in its entirety. Confidentiality will be maintained.

### I. PERSONAL INFORMATION:

1. Name (as it appears on your passport or birth certificate):

\_\_\_\_\_

First	Middle	Last
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Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Personal Email: \_\_\_\_\_

(for students) Parents' Email(s): \_\_\_\_\_

2. Place of Employment or School and Grade: \_\_\_\_\_

3. Age \_\_\_\_\_ T-shirt size \_\_\_\_\_ (please indicate Youth or Adult size)

4. In the event of an emergency, notify (include Parent/Guardian as appropriate):

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

**II. OTHER INFORMATION:**

1. Are you affiliated with Fellowship Bible Church? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, for how long? \_\_\_\_\_ If no, which church? \_\_\_\_\_

2. What does it mean to “become a Christian”? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Describe your life before you placed your trust in Christ: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Describe when and how you placed your trust in Christ: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Describe your life after you placed your trust in Christ: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Have you ever been on a mission trip before? Yes \_\_\_\_\_ No \_\_\_\_\_  
Where? \_\_\_\_\_ When? \_\_\_\_\_  
Activities on trip? \_\_\_\_\_

7. What other experiences have you had which would help prepare you for this trip?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Why do you want to go on this mission trip? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Where do you think you can contribute the most on this trip? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. What might be an area of difficulty or weakness for you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Is your spouse and/or immediate family supportive of your participation in this short-term mission trip? Yes \_\_\_\_\_ No \_\_\_\_\_  
Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. How are you planning to cover the cost of this trip? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**III. SKILLS INFORMATION:**

1. Indicate your skills in languages other than English: \_\_\_\_\_  
\_\_\_\_\_

2. What musical instrument do you play, if any? \_\_\_\_\_  
Do you have singing skills? \_\_\_\_\_

3. Check the areas and skills in which you have experience:

- |   |  |
|---|--|
| <input type="checkbox"/> Medical                    | <input type="checkbox"/> Computer skills |
| <input type="checkbox"/> Carpentry                  | <input type="checkbox"/> Masonry         |
| <input type="checkbox"/> Teaching (age group _____) | <input type="checkbox"/> Organizational  |
| <input type="checkbox"/> Camp programs              | <input type="checkbox"/> ESL             |
| <input type="checkbox"/> Sports and recreation      | <input type="checkbox"/> Drama/skits     |
| <input type="checkbox"/> Plumbing                   | <input type="checkbox"/> Electrical      |
| <input type="checkbox"/> Arts/Crafts                | <input type="checkbox"/> Evangelism      |
| <input type="checkbox"/> Food Services              | <input type="checkbox"/> Discipleship    |
| <input type="checkbox"/> Small group leader         |  |

4. If you have considerable experience in any of the above, please comment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

