

REFUGE CHRISTIAN MINISTRIES INTERNATIONAL, INC.

APPLICATION FOR SHORT TERM TEAMS

Personal Information

Legal Name: _____ Preferred Name: _____

Street: _____ Mail: _____

City: _____ State: _____ Zip Code: _____

H Phone: _____ C Phone: _____ Email: _____

Sex: M__ F__ Marital Status: Married__ Single__ Divorced__ Date of Birth _____

If under 19, have your parents approved your participation? Y N

Education Level: __ HS Grad __ College __ Grad School __ Trade School

Citizenship: _____ Country of Birth: _____

Passport Number: _____ Issue Date: _____ Exp Date: _____

Country of Issue: _____

Spouse's Name: _____

In case of emergency, please notify: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Relationship: _____

Date of Last Physical: _____ Doctor's Name: _____

Name of Medical Insurance Company: _____

Individual or Family Coverage? _____ Group #: _____

Insurance Phone Number: _____ Policy Holder Name: _____

Does your insurance cover you overseas? Yes__ No__ You will not be able to attend the trip without international insurance coverage. We have a company we use that specializes in this insurance.

Describe any medical conditions we should know about (ie: allergies, heart, diabetes, etc.): _____

Do you use alcohol, tobacco or illegal drugs? Y N To what extent? _____

List any medications you will be taking:

Name of Your Church: _____ Address: _____

Pastor's Name: _____ PHONE: _____

References: (min.2)

1-Name _____ Email _____

Relationship _____ Phone _____
(i.e. pastor, manager, leader...)

2-Name _____ Email _____

Relationship _____ Phone _____
(i.e. pastor, manager, leader...)

Describe your previous ministry experience (especially missionary experience):

Country _____ Missions Organization _____ Dates _____ Tasks Performed _____ etc _____

Please list any special skills, talents, or service experience that you feel may be helpful:

Why do you want to participate in this mission trip and do the types of ministry checked above?

Any foreign languages? _____ Proficiency: _____

Are you a Christian? Y N What is your denominational background? _____

Describe your relationship with Jesus Christ: _____

Participation Agreement

Project.Description: _____

Location: _____ Date: _____

I agree to release, discharge, and hold harmless, Refuge Christian Ministries International, Inc., its employees, agents, and members from any and all claims or demands due to personal injury, illness, or death as well as any and all property damage sustained of any nature which may be incurred by me, whether in foreign or domestic territory, while participating in the above described event or activity. I also agree to be directed by and responsible to the designated leadership for this short-term project. Further, I agree to hold harmless and to indemnify Refuge Christian Ministries International, Inc. as a result of my participation.

Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

(If under 19 years old)