

# Application form for an Overseas Mission Trip



TRIP LOCATION \_\_\_\_\_ DATE \_\_\_\_\_

FULL NAME AS APPEARS ON PASSPORT (please print): _____		DATE OF BIRTH: ____ / ____ / ____
E-MAIL ADDRESS: _____ HOME ADDRESS: _____		HOME PHONE NUMBER: _____ MOBILE NUMBER: _____
PASSPORT NUMBER: _____ DATE OF ISSUE: ____ / ____ / ____ DATE OF EXPIRY: ____ / ____ / ____ PLACE OF ISSUE: _____ Please attach a photocopy of your passport information page to the application form.	EMERGENCY CONTACT DETAILS WHILST YOU ARE AWAY (Next of Kin) NAME: ADDRESS: _____ HOME TEL: MOBILE: _____ RELATIONSHIP TO YOU: _____	
This trip may require working in an environment where there are children or vulnerable adults; you will be required to complete a DBS form. Please tick here to state that you understand this: <input type="checkbox"/> If you already have a DBS issued within the last 3 years please give details below: Ref No. _____ Date of Issue: _____	Do you have any medical condition we need to know about? (including allergies) _____ Do you have a current First Aid Certificate? Y/N      If yes, date of issue: _____	
Are you on any medication we need to be aware of? Please give details in case of emergency: _____	Do you have any specific dietary requirements or food intolerances? Please give details: _____	
If you have been attending Wellspring Church for 12 months or less, if possible please can you give details for a reference, by doing this you agree to us contacting the said person (previous Pastor or Employer) NAME: ADDRESS: _____ TELEPHONE NUMBER: E MAIL: _____	We are looking forward to this mission trip and are glad you have applied. We will contact to confirm if you are accepted on this team. By applying to be part of this trip you agree to ensure that you abide by the values of the Bible and the Church and that you have been coming to services regularly for at least 6 months. You agree to follow the leadership of the team and to ensuring that you have the correct insurance and appropriate inoculations, if needed. Signed _____ Date: _____ Applicants under the age of 18 must have parental consent and be accompanied by a responsible adult on the trip. Parent's Name: _____ Signature: _____ Date: _____	
P.T.O.		

What skills and abilities can you offer on this mission?

In a few sentences say why you would like to be part of this mission trip?

Sharing your Testimony

Please be ready to share your testimony.

A few important tips for sharing your testimony:

- keep it short (3 minutes)
- don't use English slang or English jokes (these will not translate)
- speak in one sentence at a time, if an interpreter is needed, to give them time to translate
- speak clearly and slowly
- look at the audience and not at the interpreter, if you have one
- talk more about what God has done for you since you knew Him (don't glorify sin)

Make your testimony appropriate for the audience

Please write your testimony:

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