

CONFIDENTIAL

Elementary Mission Trip Application - Christ Community Church

rev July 2013

1201 Slate Hill Road – Camp Hill, PA 17011

**Applications should be printed clearly using blue or black ink.
Complete all sections. If anything does not apply to you, write N/A for that item.**

Trip Destination

Dates

Print your full name exactly as it would appear on your passport.

Last Name

First

Middle

**Preferred
Nickname**

Parent or Guardian's Email Address

Birth Date (M-D-Y)

Gender (M or F)

Current Grade Level

Mailing Address (Street, City, State, Zip Code)

Country of Citizenship

Home Phone Number

Parent or Guardian Cell Number

Name of Parents or Legal Guardian

Have you ever been on a Mission Trip with Christ Community Church? Yes No

If yes, when and where (latest trip)? _____

Who were the Trip Leaders? _____

Are you born again? Yes No Are you Spirit-filled? Yes No

Have you been water baptized? Yes No If so, date _____ place _____

Have you ever been on a Mission Trip with any other group? Yes No

When? _____

Where? _____

To be filled out by parent or guardian:

Are you members of Christ Community Church? ___ Yes ___ No

How long have you attended Christ Community Church? _____

Are you willing to take responsibility for your child meeting specific payment deadlines?
___ Yes ___ No

How will your child pay for this trip? ___ Savings* ___ Gifts from partners* ___ Other*

Do you agree to attend monthly (or more at the leader's discretion) team meetings with your child? ___ Yes ___ No

Are both parents in agreement with child traveling on this trip? ___ Yes ___ No

If No, please explain _____

Important: *Contributions raised by you will go toward fulfilling this ministry. Should something unforeseen keep you from going on this trip, your donations would be used to help others on the team. If an unanticipated situation (political or otherwise) prevents team travel at this time, money raised would be used for future CCC Mission trips. Trip contributions are nonrefundable and cannot be held for any one individual. Your child's place on the trip may be forfeited if you fail to meet payment due dates.

Does your child have any physical limitations? ___ Yes ___ No

If yes, describe _____

Does your child have any behavioral challenges? ___ Yes ___ No

If yes, describe _____

List any current medications your child is taking and the reason _____

List any allergies (including food, medicine, bee stings, etc) _____

List any special dietary requirements and whether they will bring supplemental food for their diet _____

Are there any legal or custody issues that would prevent your child from going outside of Pennsylvania or leaving the USA? ___ Yes ___ No

Does your child have a passport? ___ Yes ___ No

Name / relationship of person to contact in case of emergency _____

Phone number of emergency contact _____

Address of emergency contact _____

Medical Insurance Carrier and Policy # _____

Medical Insurance Phone Number _____

Name and phone number of two people from CCC who know you. ***At least one of them must be a leader*** in some capacity such as pastor, director, church staff, home group leader or youth/children's ministry leader. If you work in a specific ministry at CCC, one of your two references should be a leader from that particular ministry.

(1) _____

(2) _____

I certify that all answers given on this Application are true and complete to the best of my knowledge. If chosen to participate with any mission team at Christ Community Church, I agree to abide by all direction and guidelines given before, during and following the trip as it pertains to my participation both on the trip and as a team member. This includes all direction given by the Missions Pastor, my team leader and any Missions Ministry representative as well as CCC leadership.

In the event of being chosen for this mission, I understand false or deceptive information given in my Application or interview (if any) will result in cancellation of my participation on the trip.

Signature of Applicant

Date

Signature of Parent/Guardian (if Applicant is under 18)

Date