



FBC MISSIONS

— *Live it out* —

TEAM MEMBER APPLICATION—MINOR

TEAM MEMBER'S NAME: _____

Thank you for your interest in an FBC Boerne Mission Trip!

In this application packet you will find:

- Team Member Information Sheet (returning team members do not complete page 3)
- Consent to leave/return to the United States (notarized—signed by parent/legal guardian)
- Limited Power Of Attorney and Mission Trip Release for Minors (notarized—signed by parent/legal guardian)
- Notice To Adult and Minor Volunteers
- Mission Trip Guidelines and Policies
- Financial Policies

It is very important that you read each document thoroughly and provide your signature (or notarized signature) in the areas noted.

Your application is not considered complete until all of the above documents have been completed and submitted to the Missions Pastor, along with a required non-refundable deposit (payable to FBC Boerne) at:

FBC Boerne
Attn: Mike Mantooth
631 S School St
Boerne, TX 78006

If you have any question about these documents, please contact Mike Mantooth at (830) 249-2527 or mmantooth@fbcboerne.org.

Revised January 17, 2019



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TEAM MEMBER—MINOR INFORMATION SHEET

Mission Trip Country/State: _____ Dates: _____

I. General Information

Name (as it appears on your passport):

Last _____ First _____ Middle _____

Mailing Address _____

City, State, Zip _____

Home Phone (_____) _____ Work Phone (_____) _____

Fax (_____) _____ Cell Phone (_____) _____

E-mail _____

Gender (M/F) _____ Occupation _____

Work Address _____

Marital Status Single _____ Married _____ Spouse's Name _____

I am certified to administer: CPR - Yes _____ No _____; First Aid - Yes _____ No _____

II. Travel Information

Preferred airport for domestic departure: _____

Variations in itinerary requested: _____

**** Remember: 2 copies of the passport picture page of your passport go to the church. ****

**** If you are in the process of obtaining your passport, please leave the next 2 lines blank. ****

Passport Number: _____ Citizenship: _____

Date of Expiration: _____ Date of Birth: _____

III. Field Ministry

Previous mission experience country/year: _____ Your role: _____

Are you a Pastor, Preacher, Praise Leader, Teacher, Other? No ___ Yes ___ Which? _____

Would you be willing and able to speak at worship or outreach meeting? Yes _____ No _____

Foreign language(s) you speak: _____ Fluent? _____ Semi-fluent? _____

Do you sing? No _____ Yes _____ Would you: Lead Music? _____ Play instrument? _____

Which Instrument? _____

Other skills or gifts? (drama, puppets, etc.) _____

Experience with adult and/or children's ministry? _____

What ministry involvement and/or training have you had in your church? _____

What are you praying that God will do in and through you in this mission ministry? _____

IV. Ministry Information

Home Church: _____ Pastor: _____

Phone: (_____) _____ Address: _____

City, State, Zip _____

If not a member of FBC Boerne—

How did you first hear about FBC Boerne? _____

How did you hear about this mission ministry? _____

V. Testimony

Describe how you came to trust Christ as your Savior? You may use additional sheets if you like.

How do you currently deepen and grow your personal relationship with Christ? (i.e. Bible study, prayer)

Describe how you would explain the gospel story to a non-believer.

Describe your sense of calling for being a part of this short-term trip.

Will you be seeking financial support for this trip through support letters/fundraising?

VI. Pastoral Endorsement *(Please have a pastoral staff member of your church sign below.)*

I recommend this applicant as a witness for our Lord Jesus Christ in the mission ministry with FBC Boerne.

Pastor's Name: _____ Pastor's Phone: (_____) _____

Pastor's Signature: _____ Date: _____



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CONSENT TO LEAVE/RETURN TO THE UNITED STATES FOR MINORS

I give my son/daughter _____ permission to be taken in and out of the United States to and from _____
(destination)

on _____ with _____.
(date of trip) (trip leader/trip guardian)

If the trip is delayed, I give consent for additional days delayed on this trip.

Parent Name: _____

Address: _____

Phone: Home: _____

Cell: _____

Work: _____

Signature: _____ **Date:** _____

Parent Name: _____

Address: _____

Phone: Home: _____

Cell: _____

Work: _____

Signature: _____ **Date:** _____

- ***In case of only one parent, due to death, a copy of the death certification must be attached.***
- ***In the case of court order, only one parent has custody of a child, a copy of the court order must be attached.***

Acknowledgement

STATE OF: _____

COUNTY OF: _____

The foregoing consent was acknowledged before me this ____ day of _____, _____ by _____.

(Notary Seal)

Notary Public in and for the State of _____

My Commission expires: _____

This Consent Form is valid for the trip dates listed above.



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LIMITED POWER OF ATTORNEY AND MISSION TRIP RELEASE FOR MINORS

I/we am/are the parents, legal guardians or custodians of the minor(s) designated below. I/we hereby give permission for my child to travel to _____ (city, state, or country). The dates of travel will be from _____ to _____. I/we hereby appoint the following mission trip leader(s) who will be traveling with my/our child as my/our attorney(s) in fact for the purpose of deciding and determining the type and extent of medical care, related transportation and other safety decisions needed for my/our child while traveling in the state or foreign country designated above:

Mission Trip Leader(s): _____.

The Mission Trip Leader(s) shall have my/our full and complete authority to decide what is in the best interest and safety of my/our child. This authority shall be effective for the dates specified above or until my child is returned to my/our custody, whichever is later. Without limitation, I/we grant the above named Mission Trip Leader(s) the authority to consent to any and all necessary medical treatment including but not limited to x-rays, diagnostic tests, examinations, anesthetics, medical/surgical diagnosis or treatment, and hospital, clinic or other medical facility care. I/we further give the Mission Trip Leader(s) the authority to evacuate or transport our child from any location to another location (whether in the same country or not) should such evacuation or transport be in the best interest of my/our child's medical condition or safety. We further authorize the administration of routine over-the-counter medicines such as Advil, Tylenol, aspirin, cold remedies, etc. unless these are specifically restricted below in this form.

It is understood that this consent and authority is given in advance of any specific safety situation, specific diagnosis, medical treatment or hospital care being required but it is given to provide the above described Mission Trip Leader(s) the complete, full and necessary authority to make such decisions when they deem it advisable to do so in the exercise of their best judgment, collectively or individually.

My/our child has the following medical conditions:
_____.

My/our child should be restricted from the following physical activities:
_____.

My/our child is allergic to the following medications or anesthetics and these should not be given to my child:
_____.

My/our primary or major medical insurance information is as follows:

_____.

My/our child has the following immunizations:

_____.

My/our child takes the following medications:

_____.

Date of last Tetanus shot: _____

My/our travel and/medical insurance policy information is as follows:

_____.

(Copies of the travel policies should be furnished to the mission trip leaders).

Our family physician who may be contacted in the case of an emergency is:

Name: _____

Address: _____

Phone: _____

My/our contact information is as follows:

Name(s): _____

Address: _____

Home phone: _____

Cell phone: _____

E-mail address: _____

I/we understand and appreciate fully the inherent risks of out of town or foreign travel, related safety and the uncertainties of available medical care, if any. I/we hereby give this consent and authority willingly and with knowledge of such risks and uncertainties. I/we expressly release and hold harmless the First Baptist Church Boerne and the individual Mission Trip Leader(s) from any and all liability of whatsoever kind or nature involved in the travel described herein and in the exercise of the powers and authority granted herein. To that extent I agree to have any claims of my minor child together with any interpretation of this release to be subject to the mediation and arbitration terms which read as follows:

I am a Christian and I understand that the Bible commands Christians to make every effort to live at peace and to resolve disputes with each other in private or within the Christian church (see Matthew 18:15-20; 1 Corinthians 6:1-8). Therefore, I agree with First Baptist Church of Boerne that any claim or dispute covered by, arising from or related to this RELEASE (the "Dispute") will be settled by biblically based mediation as authorized by the pertinent laws of the State of Texas. The parties agree that this Agreement shall be controlled by Texas Law.

I HEREBY WAIVE MY RIGHT TO SEEK RESOLUTION OF THE DISPUTE BY TRIAL BY JURY. IN THE EVENT THE DISPUTE IS NOT RESOLVED BY MEDIATION, I AGREE THAT THE DISPUTE SHALL BE RESOLVED BY BINDING ARBITRATION. THE VOLUNTEER AND FBCB EACH AGREE THAT ANY DISPUTE ARISING OUT OF THIS AGREEMENT OR THE SUBJECT MATTER OF THIS AGREEMENT, BY ANY PARTY TO THIS AGREEMENT, SHALL BE SUBMITTED TO BINDING ARBITRATION HELD IN KENDALL COUNTY, TEXAS BEFORE AN IMPARTIAL THIRD PARTY ARBITRATOR TO BE AGREED UPON OR, IF NOT AGREED, AS APPOINTED BY THE DISTRICT COURT OF KENDALL COUNTY, TEXAS. VENUE OF ANY ACTION TO COMPEL ARBITRATION SHALL BE IN KENDALL COUNTY, TEXAS. THIS PROVISION RESULTS IN WAIVER BY THE VOLUNTEER AND FBC OF THE RIGHT TO A JURY TRIAL OF ANY DISPUTES ARISING OUT OF THIS AGREEMENT.

Judgment upon an arbitration award may be entered in the District Court of Kendall County, Texas. I agree with First Baptist Church of Boerne that such mediation and arbitration will be the sole means available to us for resolving any controversy or claim covered by, arising from or related to this RELEASE and that we expressly waive our rights to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision. Nothing in this paragraph shall prevent First Baptist Church of Boerne from asserting or pleading this RELEASE as a defense in any action or proceeding brought against First Baptist Church of Boerne, Texas.

I/we expressly agree to be responsible for and agree to reimburse the First Baptist Church and the mission trip leaders for any medical, travel, or other expenses that may be paid or incurred by them on behalf of my/our child under the authority of this document.

Minor's name (printed): _____

Minor's address: _____

Signatures of parents or persons having legal custody:

Acknowledgement

STATE OF: _____

COUNTY OF: _____

The foregoing release was acknowledged before me this ____ day of _____, _____ by _____.

(Notary Seal)

Notary Public in and for the State of _____

My Commission expires: _____



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NOTICE TO ADULT AND MINOR VOLUNTEERS

You will be participating in a First Baptist Church (FBC) Boerne sponsored mission trip to an out-of-state or foreign destination.. The purpose of this letter is to provide you with information about the risks involved. FBC Boerne strongly encourages you to obtain information about the trip from other sources since every possible contingency, event, or occurrence cannot be addressed. You may wish to examine the U.S. Department of State website to review information or issued warnings specific to countries or regions of the world. In addition, you are encouraged to enroll in the Safe Travel Enrollment Program, sponsored by the US Department of State, at <https://step.state.gov/step>, program notifies the nearest US Consulate of your visit and location.

FBC Boerne secures Volunteer Travel Insurance, such as through Gallagher Charitable International Insurance Services, and the per diem participation fee is included in each team member's travel expenses. *Please note that this coverage is not a major medical or trip cancellation/interruption policy*, and you are free to obtain additional insurance of your choosing. Gallagher Charitable Volunteer Travel Insurance benefits include:

- Accidental Death & Dismemberment—\$100,000
- Medical Expenses—\$10,000, *\$100 deductible; no preexisting conditions Exclusion; \$2,500 of this limit is available to pay U.S. providers*
- Disability Income Benefit—\$1,000/month for 1st 100 months accident
- Emergency Medical Evacuation— \$100,000
- Security Evacuation—\$100,000
- Family Coordination and Repatriation of Mortal Remains— \$25,000
- Personal Property—\$2,500, *\$100 deductible*
- General Liability—\$1,000,000

Please remember that the laws of other countries are completely different from those in the United States. There may be a complete absence of due process in the country where you will be traveling. This means that there may be no presumption of innocence, no entitlement to an attorney, and no available court process. When in another country, you are completely subject to its laws (or the lack thereof). We encourage you to become as informed as possible about the legal and political systems in the country that you will be visiting. You must abide by the instructions given you by the mission leader while on the trip.

Please be aware that there may be certain health risks associated with travel in another country. The trip leader will provide you with as much information as possible about the medical care available to you while on the trip. Since there may be a shortage or lack of adequate medical facilities, trained physicians, and other medical staff, it is important that you receive the proper medical or health immunizations at a sufficient time in advance of the trip. Please see the FBC Boerne Missions Medical Release Form for more information about medical insurance.

The mission trip that you will participate in may subject you to physical exertion such as walking, carrying equipment, carrying supplies and/or products purposeful to the mission, and physical work such as cleaning, building, repairing, etc. FBC Boerne reserves the right to require all mission volunteers and participants to undergo a medical clearance prior to booking the trip. Please discuss this with your mission trip leader as soon as possible.

Finally, the mission trip leader will provide you with as much information as is available to them regarding how and when you might be able to communicate with your family while you are on the trip. The mission trip leader will also provide you information about how much money, if any, you should take with you. **You will be solely responsible for your money, clothing, electronic devices/cell phones, and other personal belongings that you may bring with you.**

We wish you a safe, memorable Spirit-filled trip.

Sincerely,

The First Baptist Church Boerne

Signature: _____

Date: _____

Printed Name: _____



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MISSION TRIP GUIDELINES AND POLICIES

I realize that the following elements are crucial to the effectiveness, quality, and safety of our mission trip together. As a member of the mission team, I agree to:

1. Remember that I am a guest working at the invitation of a local pastor and local ministry.
2. Remember that I have come to learn and help. I may run across procedures and activities that I feel are inefficient, or attitudes that I find closed-minded. I will resist the temptation to inform our hosts about “how I do things”. I will be open to learning other people’s methods and ideas.
3. Respect the host’s view of Christianity. I recognize that Christianity has many faces throughout the world, and that the purpose of this trip is to witness and experience faith lived out in a new setting.
4. Respect the religious views of all faiths as I interact with the people of my host country.
5. Provide my service, skills, and care for all people without regard to their faith, race, or socio-economic condition.
6. Develop and maintain a servant’s attitude toward all nationals and my mission teammates.
7. Respect my Team Leader(s) and his or her decisions.
8. Refrain from complaining. I know that travel can present numerous unexpected and undesired circumstances, but the rewards of conquering such circumstances are innumerable. I will try to be creative and supportive.
9. Refrain from gossip. I may be surprised at how each person will blossom when freed from the concern that others may be passing judgment.
10. Respect the work that is going on in the country with the particular church(es) or person(s) with whom we are working. I realize that our team is here for just a short while, but that the local church is here for the long term. I will respect their knowledge, insights, and instructions.
11. Refrain from negative political comments or hostile discussions concerning our host country’s politics.
12. Remember not to be exclusive in my relationships. If my friend is on the team, we will make every effort to interact with all members of the team, not just one another.
13. Refrain from any activity that could be construed as a romantic interest towards a national. I realize certain activities that seem innocent in my own culture may seem inappropriate in others.
14. Refrain from any activity or behavior that would embarrass the ministry or demonstrate un-Christ-like behavior while on the trip.

Signature: _____

Date: _____

Printed Name: _____



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MISSION TRIP FINANCIAL POLICIES

Expenses

Team Members will receive an estimate of the total cost of the mission trip in advance of the trip. Team Members are responsible for the full expense of their participation in the Mission Trip. They may accomplish this through self-payment, fundraising, or contributions made to FBC Boerne with a *preference* that the contribution be applied toward personal expenses. The estimate is generally all-inclusive, consisting of airfare, baggage fees, ground transportation, meals, lodging, and trip insurance. The Trip Leader will provide a payment schedule, including a non-refundable deposit to be sent with the approved application.

See below for information on support raising and charitable contributions.

Support Raising

As a short-term mission Team Member, you will be a representative of Christ and the church body traveling to another part of the world to engage in this global calling. You are urged not to go on this journey alone but to build a support team at home that will pray for you, encourage you, and potentially financially support the church's ministry. By sharing this opportunity with others, you will fulfill the most important need - having people pray for you before and during the short-term mission trip.

You are not required to raise financial support for the trip. If you are able to cover the cost of your trip without raising support, you are encouraged to consider raising support for ministry activities that will take place during the trip. You can raise support through sending out letters to friends, family, and church members that you know, participate in team fundraisers, and other creative ways that you might consider.

The most common approach to finance a short-term mission trip is for supporters (trip participants or other givers) to fund through charitable gifts to FBC Boerne. Since FBC does not accept funds for the benefit of a specific individual, all written and verbal information must communicate that gifts are made to support the church's missions outreach. Since all funds are considered "Team Funds", any amount collected over the cost of the trip will not be refunded or carried over to another or future mission trip for the Team Member. Your FBC Team Leader will provide you with a sample support raising letter and response form to assist you in communicating correctly and clearly.

Donors should make checks out to FBC Boerne with "Mission Work [Country Name]" on the memo line. Each team member will collect his/her mission trip response forms and submit them to the Team Leader. Please keep a personal log of response forms that indicate a *preference* that the gift be used to support your short-term mission trip. According to IRS regulations, contributions received in this manner are considered a charitable contribution and will be reported on a contribution statement at the end of the year in which the donation was made. This also applies to a parent who pays for a child, and Team Members who pay for themselves.

Participants are welcome to raise support from FBC members with whom they have a personal relationship. Team Members, however, are asked **not** to engage in a mass solicitation of funds from other FBC members.

Withdrawal from Participation

If a Team Member withdraws from the Mission Team, any support he/she has raised or made as self-payment cannot be refunded and will remain as support of the Team as discussed above. Team Members need to communicate to their supporters that refunds are not given should the Team Member choose or be unable to participate on the trip. If a Team Member withdraws after an airline ticket has been purchased, the ticket will be transferred to him/her for their personal use. Additionally, any fees that are required to transfer the ticket or any remaining ticket balance become the responsibility of the ticket holder.

Covered/Non-Covered Items

The following are elements of the trip that are covered or not covered in the cost of the trip:

Covered (included in cost of trip)	Not Covered
Visa/visa preparation	Inoculations (vaccines)
Airfare	Malaria pills and other medications related to trip
Translators	Passport photos and passport applications
Accommodations	Support raising costs (postage, etc.)
Group meals	Additional meals/snacks/drinks
Ministry related travel in country	Travel outside of trip scope
Ministry related activities	U.S. airport parking/tolls/mileage
	Personal telephone calls

**Any exception to these policies must be approved by the Missions Pastor.*

Signature: _____

Date: _____

Printed Name: _____

Sample Team Building & Support Raising Letter

Note: This short-term mission trip fundraising letter demonstrates elements which follow IRS guidance for gifts to qualify for a tax deduction. All written and verbal communication should include similar language. Your Team Leader will provide pertinent details for you to include in your support raising letter..

Date

Dear _____ ,

This summer, I have an exciting opportunity to serve the Lord on a mission trip sponsored by our church, FBC Boerne. Fifteen members of my church plan to participate in a 10-day trip. We will fly to Chisinau (Kishnev), Moldova on June 28.

Our ministry is to partner with Kishnev Bible Church (KBC) to provide a teen sports camp. The goal of the camp is to connect with youth who have had little to no experience with Christ and to introduce them to a caring church in which they can learn what it means to have a relationship with our Savior. Sponsors from our church will accompany our team and provide ministry oversight.

I have taken a step of faith and obediently said yes to go on this mission trip. I am excited and grateful for the opportunity! However, it is a step of faith, and that is why I am writing to you. One of the ways you can help me is to pray for the trip, the ministry we will perform, and for me personally. Only with a prayer support will I be able to bless the Moldovan youth who attend the camp.

Yes, there are financial needs. The cost of the trip is \$2,800, which each team member is responsible to raise in gifts for our church. Please pray with me that the funds to cover my trip expenses will be provided.

Gifts to the church, with an expression of a preference for my trip expense, are tax deductible to the extent allowed by law.

If you will commit to pray, please check the appropriate box on the enclosed form. If you are able to make a gift to the church to assist with my expenses, indicate your interest in helping fund my portion of the trip expenses, and make your check to the sponsoring church, FBC Boerne. If I am unable to participate in the trip, your gifts will be used to support the short-term mission program of the church.

If you have any questions, please contact me at (home or cell number). Please return the enclosed form to (home and/or email addresses).

May God bless you richly as you consider your involvement in this mission trip!

Sincerely,

Your Name

Sample Short-Term Mission Trip Gift Response Form

_____ We want to support the international missions outreach of FBC Boerne through prayer.

_____ We want to support the international missions outreach of FBC Boerne in Moldova and are sending our gift of \$_____.

_____ We want to support the international missions outreach of FBC Boerne and are sending our gift of \$_____. Our preference is that this gift be used to support the short-term mission trip of _____ (participant's name).

We understand that the use of the gift is subject to the discretion and control of FBC Boerne.

Please make checks to "FBC Boerne" and indicate "Missions Work, Moldova" in the memo line.

Giver(s):

Sue and John Doe
1234 FBC Lane
Boerne, Texas 78006

Note: If a giver wishes to identify the preferred participant on the check, the "*preferential*" or "*to support the trip of*" terminology should be used to avoid communicating the gift is earmarked for a particular participant. It is more advisable for the giver to check an appropriately-worded box on the response form to indicate a *preference* to support the ministry of a particular trip partici-