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(2019)

MISSION TRIP APPLICATION

Mission Trip registration requires two steps:

- 1. This completed application (good for all year)
- 2. A reservation deposit online www.lakesidebc.org/outreach

Return this application to Linda Christensen in Missions Office:

- > or scan and email to gomissions@lakesidebc.org
- > or mail to: Lakeside Missions Office

500 West Bluebonnet Granbury, TX 76048

Lakeside Missions Office Phone: 682-936-4743

** Contact the Lakeside missions office if you need information about possible financial assistance for Lakeside BC members.

MISSIONS OFFICE USE ONLY:

- Online Reservation Deposit
- Personal Information/Application
- Copy of Passport
- Copy of Driver's License
- Copy of Insurance Card
- Medical Consent
- Testimony/Story
- o Volunteer Agreement and Release
- Travel Authorization for Minors (separate pdf document)
- Ministry Safe / Background Check

LOCATION(S):	

PROVIDE COPY OF PASSPORT PICTURE PAGE AND DRIVERS LICENSE

PASSPORT NAME: (exactly as on passport)	PASSPORT NUMBER
PASSPORT EXPIRATION DATE	DRIVERS LICENSE NUMBER
BENEFICIARY	BENEFICIARY RELATIONSHIP

YOUR STORY

Describe how and when you trusted in Christ as your Lord and Savior.

Why do you want to be on this specific mission team?

Briefly explain what you hope to see the Lord do in and through you on this mission trip.

$\ \, \textbf{MEDICAL CONSENT FOR} \, \underline{\textbf{ADULT}} \\$

(2 pages)



TO WHOM IT MAY CONCERN,

1.	I,, age, born, residing at
	make oath and say that I am of majority age.
2.	Lakeside Baptist Church and its Representatives (LBC), 500 West Bluebonnet Road, Granbury TX, in the event that I am incapacitated and cannot elect appropriate medical care on my own, has my consent to administer any treatment (including but not limited to: x-ray, examination, anesthetic, medical, surgical or dental diagnosis and any hospital care) that are considered necessary in the in the best judgment of the attending medical or emergency personnel. This consent is given prior to any such medical treatment, but is given to provide authority and power on the part of LBC and its representatives in the exercise of their best judgment upon the advice of any such medical or emergency personnel.
3.	If the injury or illness is life threatening or in need of emergency treatment, I authorize LBC to summon any and all professional emergency personnel to attend, transport, and treat the participant and to issue consent for any x-ray, anesthetic, blood transfusion, medication, or other medical diagnosis, treatment, or hospital care deemed advisable by, and to be rendered under the general supervision of, any licensed physician, surgeon, dentist, hospital, or other medical professional or institution duly licensed to practice in the state in which such treatment is to occur.
4.	This consent is valid for the duration of each selected Lakeside sponsored mission trip in which I participate in this calendar year of 20
5.	Our contact info: Cell phone(s):
Sig	ned this day of, 20
Sig	nature
	CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC
Sw	orn to (or affirmed) and subscribed before me this day of, 20
No	tary Public
Sta	ate of Texas

Personal Information		
Name	Γ	Date of Birth
Address		
Email		
Occupation		
Emergency Contact Name		
Relationship		
Cell Phone Ema		
Marital Status: Single Married		
Health Information		
Physician Name		
Insurance Company		
Name of Insured:		icy/ID #
Insurance Company Phone(s)		
Fax		
Year of Last Tetanus Shot	Blood Type	
Medications Currently Taken and Reason	n:	
Any Special Health or Diet Needs or Concern	ns:	
PLEASE PROVIDE A COPY	OF YOUR CURRENT INS	URANCE CARD
iigned:		Date:

VOLUNTEER AGREEMENT AND RELEASE



I have freely requested to be allowed to participate on a short term mission through Lakeside BC. If accepted as a member of such mission team, I hereby fully agree to and accept the following:

I, the undersigned, acknowledge that participating in any LBC mission trip (the "mission trip") involves certain risks and that injury, death or other harm, including damage or loss to property could occur to me ("injuries"). I hereby assume full responsibility for the risk of injuries, whether caused by negligence or otherwise. I, on my own behalf and on behalf of my heirs, successors, assigns, executors and administrators, hereby release and hold harmless and agree to indemnify Lakeside Baptist Church of Granbury Texas and its staff, volunteer leaders, members, employees, deacons, ministry leadership and missionaries ("LBC") from and against any and all liability, claims, damages, causes of action, loss, costs and expenses (including, without limitation, attorney fees) for injuries arising out of or connected with the mission trip, including traveling to and from the location(s) of the mission trip.

- 1. I go as a disciple of Jesus Christ and will have a servant attitude when interacting with my fellow team members, the local pastor, missionaries, mission organization, and people group. I will abstain from making derogatory comments regarding people, politics, sports, religion, race or traditions. I agree to abstain from the use of alcoholic beverages, illegal drugs, and any other behavior that would hinder Christian ministry. I will respect and follow the advice given concerning attire, food, and other cultural traditions.
- 2. I will accept and submit to the leadership and authority of the team leader and promise to abide by his or her decisions. I also commit not to give any gifts, except those gifts pre-approved by the team leader or hosts. If I feel compelled to give any other gift, I will first consult with the team leader and will abide by his or her decision.
- 3. I understand that travel can be difficult, and I promise to adopt a flexible attitude, as plans may need to be changed. I will travel with the rest of the team, unless other prior arrangements have been made. I am aware that the inconsistent nature of travel may also result in delays.
- 4. I will attend all team meetings, both prior to departure, during the mission trip, and after our return. Also, I will expeditiously follow up on all requirements for passports, visas, vaccinations, support raising obligations, Ministry Safe certification, background check and the like.
- 5. I further agree that in the event my conduct is considered by the team leader to be so unsatisfactory that it jeopardizes the success of the mission trip, and that mediation during the trip has failed to correct my behavior, that my services in connection with this mission trip shall end, and I shall return home immediately at my own expense. The team leader's decision to terminate me as a team member will be final.
- 6. By signing below, I represent that I am at least eighteen (18) years of age or older, or my parent/guardian will sign also, accepting the above conditions of my behalf.

Signed	Date
Parent/Guardian (if above is a minor	Date

MEDICAL CONSENT/RELEASE FOR MINOR (2 pages)



TO WHOM IT MAY CONCERN, 1. I/We, and make oath and say that I/we are the lawful Guardians of: (Male, Female), age , born . 2. Lakeside Baptist Church and its Representatives (LBC), 500 West Bluebonnet Road, Granbury TX, has my consent to administer any treatment (including but not limited to: x-ray, examination, anesthetic, medical, surgical or dental diagnosis and any hospital care) that are considered necessary in the best judgment of the attending medical or emergency personnel. This consent is given prior to any such medical treatment, but is given to provide authority and power on the part of LBC and its representatives in the exercise of their best judgment upon the advice of any such medical or emergency personnel. 3. If the injury or illness is life threatening or in need of emergency treatment, I authorize LBC to summon any and all professional emergency personnel to attend, transport, and treat the participant and to issue consent for any x-ray, anesthetic, blood transfusion, medication, or other medical diagnosis, treatment, or hospital care deemed advisable by, and to be rendered under the general supervision of, any licensed physician, surgeon, dentist, hospital, or other medical professional or institution duly licensed to practice in the state in which such treatment is to occur. 4. This consent is valid for the duration of each selected Lakeside sponsored mission trip in which the above named minor (my child) participates for the calendar year of 20 . 5. Our contact info: Cell phone(s): Signed this _____, 20____ Signature _____ CERTIFICATE OF ACKNOWLEGDEMENT OF NOTARY PUBLIC Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____

Notary Public State of Texas

Personal Information of Mission Trip	Participant (Minor)	
Name	Phone	DOB
Address		
Emergency Contact: Name		
Cell Phone		
Relationship	Email	
Health Information		
Physician Name		Phone
Insurance Company		
Name of Insured:	Group/Poli	cy/ID #
Insurance Company Phone(s)		
Fax		
Year of Last Tetanus Shot	Blood Type)
Medications Currently Taken and Re	eason:	
Any Special Health or Diet Needs or	Concerns:	
PLEASE PROVIDE A COR	PY OF YOUR CURRENT INS	SURANCE CARD
Signed by Participant:		Date
Parent/Guardian		Date



THE FOLLOWING PAGES ARE DESIGNED FOR THOSE
WHO ARE IN NEED OF IDEAS FOR FINANCIAL
ASSISTANCE FOR MISSION TRIPS.

Tips for Raising Financial Support

- A mission trip is a step of faith for you, your family, and your church working together. He wants to grow your faith even before you start the mission trip itself, through spiritual and physical preparation.
 - This faith-stretching adventure requires you to step out in action, believing that God has called you and trusting He will help you in the midst of your active obedience. Watch Him work in your life you will be blessed far beyond a monetary value.
- First and foremost, begin with prayer! If God has called you to serve Him on a particular mission trip, He will provide your every need! "Be anxious for nothing, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. And the peace of God, which surpasses all comprehension, will guard your hearts and your minds in Christ Jesus."

 Philippians 4:6-7
- > During your prayer time, ask God to identify family members, close friends, and relatives that you might invite to join you on this mission as a prayer partner or financial support. Begin making a list as you pray. Lakeside Missions has provided a template for a support letter see it on next page.
- ➤ Identify ways you can make a personal sacrifice to help pay for your trip...examine your discretionary spending habits and commit to areas where you can spend less and allocate those funds towards your trip (e.g. eating out less, cut back on non-essential purchases, fewer trips to Starbucks, etc). Record the areas you identify below:

0	Cut back on .	to save Ş	per week/month
0	Cut back on	to save \$	per week/month
0	Cut back on	to save \$	per week/month

- Consider having a garage sale. If you don't have items for a garage sale, invite friends, family members, and neighbors to donate items for your garage sale to raise money for your mission trip.
- Consider other ways you can raise money using a specific gift, talent, or expertise (e.g. provide lawn care services, cleaning services, babysitting, tutoring, meal prep for busy families, private music lessons, etc.).
- On a monthly basis each year, consider making a commitment to allocating a certain amount of your income to your own "mission fund" to build a reserve that is available when God calls you to join a specific team on mission. This can be a wonderful family venture and a wonderful opportunity to model for your children the importance of following God's command to go and make disciples. You might consider a family goal or a goal for each family member and encourage your children to set aside a certain percentage (after the regular tithe) of their birthday/Christmas money, allowance, or pay check if they are working. You can get really creative with this idea!

Support Letter:

Do not send your letter to the LBC membership arbitrarily, but rather send to those who have invested interest in you -- friends, relatives, also send to out-of-town contacts, etc.

SAMPLE LETTER

(Date)
Dear,
I hope and pray you are doing well. I am excited to tell you about a great mission opportunity I have this year. I will be going to <i>(location and dates)</i> as part of a team with my home church, Lakeside Baptist Church in Granbury, Texas. We will be involved in <i>(type of ministry)</i> . I know I will glean and learn so much from the Lord through this experience.
<u>I need your help</u> . Would you consider being one of my support team members? I ask you to support me by either (or both):
** Prayer support. I would love to know that you and others are praying daily for us as we prepare and go on this mission. We desperately need the Lord's grace and power through faithful pray-ers. ** Financial support. The trip costs \$ I am working hard to earn and save funds for this trip cost. Additionally, I am praying and trusting that the Lord will provide and help me raise a balance of \$ I need to have the balance of the money paid by (date, one month prior to trip). If you can help with any amount, thank you so much. In the event that I raise more money than needed, the extra amount will be directed to assist someone else on that mission team. Remember, this support is tax deductible for you.
I cannot wait to report back and share details about all that God was able to accomplish through our team and through your willingness to pray and/or provide financial support. Thank you so much for your support.
Blessings, (your name)
PS – read (choose a scripture verse); this is my prayer as we go, love and serve in (location).
Make checks payable to "Lakeside Baptist Church". Do NOT write my name anywhere on the check. You may include a note or sticky with my name. Write "(<i>location</i>) mission trip" on the memo line.

Lakeside Baptist Church 500 West Bluebonnet Granbury, TX 76048

Prayer and Support Partners

Name	Address and Email	Monetary Donation	Thank you sent	Post trip letter sent

LAKESIDE MISSION TRIP SCHOLARSHIP APPLICATION



Name:
Mission Trip:
Explain how you feel called by God to attend this particular trip:
Explain how you are currently living on mission within Lakeside and our community
How often do you attend church and participate in your LIFEgroup?
What amount of the trip cost are you capable of contributing?
What plan do you have to raise additional funds beside scholarship (see attached ideas)?
Have you received LBC mission scholarships within the last 2 years? If so, when and where?

Submit this application <u>prior to</u> the published registration deadline for that mission trip; either by email: <u>gomissions@lakesidebc.org</u> OR bring to Linda Christensen in the missions office.

See <u>www.lakesidebc.org/outreach</u> to access mission trip registration info.