



# Abundant Life Church

## Short-Term Mission Team Check-List

### **Team Member Application**

**Section A** - Print your full legal name. It **must** match the name on your passport exactly. If you don't already have a passport, use the name that is going to appear on your passport. If you have a valid passport, but have changed your name since issued, use the name on your passport, not your new name.

**Section B** - Please make sure to print legibly while writing phone numbers and **especially your email address**. If you do not personally have an email address you need someone's email address who will receive team information and support updates for you regularly. Emergency Contact cannot be a team member.

**Section C** - Your medical information may be necessary in the event of an emergency. Fill out each area completely and add any additional, pertinent information. If the answer "none" applies, please check the box next to "none".

**Section D** - Declaration of Commitments

**Section E** - Please share your personal testimony, current walk with Christ and any previous ministry experiences.

**Section F** - We actually **want** you to **read the fine print!** You must sign the Legal Waiver before you can be a part of an ALC team. If you are under 18 years of age, your parent/guardian must sign as well.

**Team Member Application Fee** A non-refundable application fee of **\$150** must accompany your application. If you are accepted, the fee will be applied to your support. Checks must be made payable to Abundant Life Church.

**ALC SERVE Application** Please complete the ALC SERVE application.. This is a required step before being approved for a team and includes a personal reference check and a background check. You can complete this online at [www.alcpdx.com/serve](http://www.alcpdx.com/serve)

**Passport Copies** Make two copies of your passport and submit them. For an international team you need to obtain a passport; if you do not have a passport, apply for one immediately. The processing time for a first-time passport can be 10 to 14 weeks. Information regarding passport applications and renewals can be found at: <http://travel.state.gov/passport>. If you currently have a passport, check its expiration date; your U.S. passport be valid at least six months beyond the date of your trip.

**Minors: Medical/Travel Release** If you are under 18 years of age, you need to complete additional documentation for minors. Please note that if you are traveling internationally the Minor's Travel Release requires a notary. Also, throughout the team member application form your parent/guardian's signature is also needed.

For office use only:

- Application complete (with deposit)**
- Safety Screening cleared**
- Team Leader Approval**
- Account set up in Managed Missions**
- Support receipt emailed**



# Abundant Life Church

## 2018 Short-Term Mission Team

**SECTION**

**A**

**A \$150 deposit (make check out to Abundant Life Church) must accompany this application.**

Team \_\_\_\_\_

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Passport # \_\_\_\_\_ Expiration date (dd/mm/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_ Citizenship Country \_\_\_\_\_

Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_  Male  Female Marital status \_\_\_\_\_ If married, spouse \_\_\_\_\_

**SECTION**

**B**

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Best phone (\_\_\_\_) \_\_\_\_\_ cell – home – work (circle one)

Email

If you attend Abundant Life Church (ALC), which Campus do you attend?  Happy Valley  Sandy  Vancouver

Are you an ALC member?  Yes  No

If you do not attend ALC, what church do you attend? \_\_\_\_\_

**Emergency Contact** (Not a team member) \_\_\_\_\_

Relationship \_\_\_\_\_ Best Phone (\_\_\_\_) \_\_\_\_\_ cell – home – work (circle one)

Email

**SECTION**  
**C**

**GENERAL HEALTH**

**MEDICAL HISTORY** – Have you ever had any of the following:

**None**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Asthma          | <input type="checkbox"/> Heart Disease       | <input type="checkbox"/> Migraine Headache    |
| <input type="checkbox"/> Blood Disorder  | <input type="checkbox"/> Hepatitis           | <input type="checkbox"/> Recurrent Infections |
| <input type="checkbox"/> Cancer          | <input type="checkbox"/> High Blood Pressure | <input type="checkbox"/> Rheumatic Fever      |
| <input type="checkbox"/> Diabetes        | <input type="checkbox"/> Kidney Disease      | <input type="checkbox"/> Seizure              |
| <input type="checkbox"/> Fainting Spells | <input type="checkbox"/> Lung Disease        |   |
- Other, please explain \_\_\_\_\_

**Medication** - List all medications (**both prescription and over-the-counter**) you are currently taking (name and dosage).  **None**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Allergies** - Specify any allergies to medications, foods, insects, etc. and describe reactions \_\_\_\_\_  **None**

\_\_\_\_\_  
\_\_\_\_\_

**Diet** - Explain any special dietary needs \_\_\_\_\_  **None**

\_\_\_\_\_  
\_\_\_\_\_

**Is there any reason why you cannot tolerate any of the following?**

- Rigorous Activity    High Altitudes    High Humidity    High Temperatures    Low Temperatures    **None**

Other: Please explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Additional medical information your team leader should be aware of** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Medical Insurance Information**

Insurance Company \_\_\_\_\_ Group # \_\_\_\_\_

Subscriber Name \_\_\_\_\_ Policy # \_\_\_\_\_

Primary Doctor's name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**SECTION**

**D**

**DECLARATION OF COMMITMENTS**

1. I agree with the vision and mission of this trip and will do everything I possibly can to help my team reach these goals. Initial \_\_\_\_\_
  
2. I will submit to the authority of the team leaders, co-leaders and in-country church/ministry leaders on this mission trip without complaint. Initial \_\_\_\_\_
  
3. In the months leading up to departure for the ALC Short Term Mission, I will support the Missions Team, participate in team activities (meetings and trainings), check my e-mail regularly, and read all materials and communications provided to me by leadership. Initial \_\_\_\_\_
  
4. I will maintain a positive attitude throughout this mission trip and will work hard to be the best team player I can be. Initial \_\_\_\_\_
  
5. I am willing to respect all cultures and people I meet on this mission trip, in example, word and deed. Initial \_\_\_\_\_
  
6. I have a strong desire to serve thru the ALC mission's team; I will do that in a Christ like manner. Initial \_\_\_\_\_
  
7. I commit to allowing God to teach me new things about myself and others; I will allow God to change me. Initial \_\_\_\_\_
  
8. I will refrain from the use of any alcohol (unless otherwise noted by the team leader), illegal drugs, profanity and sexual contact outside of the ALC marriage policy . Initial \_\_\_\_\_
  
9. I give consent to the sharing of my personal information between team members and Abundant Life Church, but only for the purpose of communication necessary for the selection of team members, planning and conducting this trip. Initial \_\_\_\_\_

I have read and agree to abide by the items listed above in the Declaration of Commitments.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



**SECTION  
F**

**LEGAL WAIVER**

I am aware that all positions are voluntary, without financial remuneration. I agree to abide by all present and subsequent issued rules of Abundant Life Church (ALC). I clearly understand that raising all expenses, including travel to and from the training location (if applicable), will be my responsibility. I further agree that ALC has the right to discontinue my ministry at any time at their sole discretion.

I recognize that participation on a trip of this nature may be hazardous or dangerous. Therefore, I am, for myself, my heirs, executor and/or administrator, releasing and forever discharging ALC and all its officers, agents, servants, and employees, acting officially or otherwise, from any and all reason of injury, damage (including property damage to any of my belongings), loss or death which may occur from any cause including, but not limited to, any accident and/or occurrence while participating with this mission agency and/or on this mission trip.

I have answered the questions on this application completely and accurately, and have not withheld any information that is relevant to my being considered on this team. I understand that if, after being accepted to the team, team leaders discover relevant information that I left off the application, I may be removed from the team and any funds in my account may be forfeited.

**Media Waiver:** I give Abundant Life Church the right to use my photo, voice and/or testimony in any form of promotional materials.

**I have read the above and understand my participation and financial commitment and that signing this form confirms my intent to participate on an ALC team.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Guardian \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name of Guardian \_\_\_\_\_

**Please verify by contacting Jeff Boxell at [jeff@alcpdx.com](mailto:jeff@alcpdx.com) to see if ALC has a current ALC SERVE application on file with up to date references and Background check. If not, you will need to fill out those forms in addition to this application. You can fill out an ALC SERVE application at [www.alcpdx.com/serve](http://www.alcpdx.com/serve).**

**Please mail completed/signed application and your \$150 deposit check to:**

Abundant Life Church  
Attn: Global Outreach  
17241 SE Hemrich Rd.  
Damascus, OR 97089