

High School Student Ministry Mission Application

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New Hope Church, 5307 W. Fairview Rd. Greenwood, IN 46142

MISSION & DATES Nicaragua Sports Mission Cost: \$1300-\$1500 (\$150 deposit w/ app)
July 2-9, 2016 Application Deadline: Sunday, January 10, 2016

If filling out the application by hand, please fill it out neatly and legibly.

PERSONAL INFORMATION

Full Name:

Home Address:

City:

Zip:

Phone Number: ()

Cell Number: ()

Email Address:

Birthday (MM/DD/Year):

Age:

Gender:

T-shirt size: S M L XL XXL

PARENT INFORMATION (if under 18 years old)

Name of Father or Guardian:

Address (if different than above):

City:

State:

Zip:

Phone Number: ()

Cell Number: ()

Name of Mother or Guardian:

Address (if different than above):

City:

State:

Zip:

Phone Number: ()

Cell Number: ()

Parent/Guardian Email Address:

How do your parents/guardians feel about you serving on this mission team?

MEDICAL BACKGROUND

In case of emergency, contact:
(if we are unable to reach your parents)

Relationship:

Phone:

Cell phone:

How would you describe your health? Excellent Good Fair Poor

List any allergies:

List any physical limitations:

List any medications you are currently using:

CHURCH AFFILIATION

Name of Home Church:
*(If New Hope Church, skip down to ** question)*

Address:

City:

State:

Zip:

******How long have you attended this church?

Do you participate in New Hope High School Ministry/INFUSE? Yes No
(If Yes, skip to the next section. If No, please answer the following questions.)

Do you participate in another Youth Ministry? Yes No

If Yes, please list your Youth Pastor's name and phone number:

Youth Pastor:

Phone Number:

If No, please list the name and contact number of someone who has known you for at least one year and can speak about your character and spiritual development:

Reference Name:

Phone Number:

CHURCH/COMMUNITY EXPERIENCE

What service in your church and/or community are you currently involved in?

Service Activity

Your Role

Length of Service

MISSION EXPERIENCE

Please list any previous mission team experience you have had.

Mission Team

Length of Mission

Date (Year)

MOTIVATION

What motivated you to be a part of this mission team?

HOPES AND EXPECTATIONS

What are 1-2 ways you would like to grow (personally, spiritually, relationally, intellectually, socially, etc.) as a result of serving on this mission team?

RELATIONSHIP WITH JESUS

Describe your relationship with Jesus.

Briefly describe 1-2 things that you believe God is trying to teach you or show you at this time in your life.

How can we specifically pray for you as you prepare for this experience?

TEAM MEMBER PARTICIPATION EXPECTATIONS

As a part of the Nicaragua Mission Team, you must commit to trainings prior to the mission experience, as training is critical in your preparation for the mission and is part of the mission experience as a whole. You are also required to attend one follow-up session to debrief the trip. The dates for trainings and follow-up sessions are as follows:

Trainings (all on Sundays):

1. January 24, TBA
2. February 14, TBA
3. March 13, TBA
4. April 10, TBA
5. May 15, TBA
6. June 5, TBA (includes mandatory parent meeting/training)

Follow-up Session: Sunday, July 17 TBA

Do you foresee any issues with attending any of these trainings or the follow-up session? Yes No
If yes, please explain. (Keep in mind that if you unable to attend trainings/follow-up session, it would be better to apply for this mission opportunity at a time when you can commit to the *entire* mission experience.)

You may pay your \$150 deposit by debit/credit card online at becomehope.ccbchurch.com, or you may pay by cash/check with this application. (Check made out to New Hope Church, memo: Nicaragua Sports Mission)

I HAVE COMPLETED THIS APPLICATION FORM HONESTLY AND TO THE BEST OF MY ABILITY, UNDERSTANDING THAT FAILURE TO ANSWER QUESTIONS HONESTLY AND THOROUGHLY MAY AFFECT MY ACCEPTANCE ONTO THE MISSION TEAM. I ALSO COMMIT TO FULLY PARTICIPATING IN ALL TRAINING REQUIREMENTS AND THE ENTIRE MISSION EXPERIENCE, UNLESS OTHERWISE STATED IN THE LAST APPLICATION QUESTION AND DISCUSSED WITH KELLY BROOKS, TRIP DIRECTOR.
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Signature:

Date: