

FBC MISSION TRIP APPLICATION

**First Baptist Church mission trips are open to FBC members only
(unless otherwise specified).**

GENERAL INFORMATION

Print your name as it appears on your driver's license (passport – for international trips).

Legal Name: _____
(First, middle and last as it appears on your passport or Driver's License)

Title: _____ Preferred Name: _____
Mr. Mrs. Ms. Rev. Dr. (If different than above)

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____ Email address: _____

Date of Birth: _____ Gender (M/F): _____

Marital Status: ___ Single ___ Married T-Shirt Size: _____

INSURANCE INFORMATION

Medical Insurance _____ Policy # _____
Company Name

TRAVEL INFORMATION - ONLY COMPLETE FOR INTERNATIONAL MISSION

TRIPS

Passport Number: _____ Citizenship: _____

Date of Issue: _____ Date of Expiration _____

Issued By/ Place: _____

EMERGENCY INFORMATION

Name of Emergency Contact #1 _____

Street Address: _____

City/State/Zip: _____

Mobile Phone: _____ Home Phone: _____

Work Phone: _____ Email: _____

Relationship: _____

Name of Emergency Contact #2 _____

Street Address: _____

City/State/Zip: _____

Mobile Phone: _____ Home Phone: _____

Work Phone: _____ Email: _____

Relationship: _____

HEALTH INFORMATION

If you prefer this to be confidential, please give this information in a sealed envelope.

Primary Doctor Contact:

Name: _____ Phone # _____

Do you have any particular health problems? YES NO

If yes, please briefly describe: _____

Are you on any long-term medication? YES NO

List medications: _____

List chronic diseases/allergies:

MINISTRY EXPERIENCE

Which trip are you applying for? _____

Have you previously participated in a short-term trip? YES NO

If yes, where and when? _____

Name of the Organization: _____

Do you speak a foreign language? YES NO

If yes, which language(s)? _____

Are you currently serving in a ministry? Describe. _____

What previous ministry experience and/or training have you had? _____

What learned or professional skills do you have? _____

Why do you want to participate in this trip? _____

What are you praying God will accomplish in your life through this trip? _____

BRIEF PERSONAL TESTIMONY

Feel free to use more space if necessary.

My life before I received Christ: _____

When and how I received Christ: _____

My life since receiving Christ: _____
