



Shalom Outreach, Inc.
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On the Web: <http://www.shalomoutreach.org>

MISSION TRIP APPLICATION FORM

Application Date:		Country Traveling To:		Travel Dates:	
Name:	Last	First	Middle	Initial	Preferred Name
Address:	Street/Box		City	State	Zip
Telephone Number:	Cell	Home	Work	Email Addresses:	
Date of Birth: — —	<input type="checkbox"/> Female <input type="checkbox"/> Male		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow/er <input type="checkbox"/> Divorced		
Do you have a passport? <input type="checkbox"/> Yes <input type="checkbox"/> No Passport number:			Country Issued:	Expiration Date:	
Emergency Contacts (Please List 2):					
Name: _____ Relationship: _____					
Address: _____					
Telephone Number: _____					
Email Address (if applicable): _____					
Name: _____ Relationship: _____					
Address: _____					
Telephone Number: _____					
Current or Last Employer			If Student, Name of School:		
Name of Company: _____			_____		
Address: _____			_____		
_____			_____		
Telephone Number: _____			_____		
Email Address (if applicable): _____			_____		

Health Insurance Information: Insurance Company: _____ Policy Number: _____ Comments: _____ _____	Beneficiary Designation: Name: _____ Relationship: _____ Address: _____ Telephone Number: _____
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List any disabilities or health issues:

How long have you been a Christian?	Are you a member of a local church? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how long?
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Areas of involvement in your local church:

Skills/Talents:

TERMS AND CONDITIONS:

I hereby submit that upon arriving in the mission field, if any of my actions are found to be not in compliance with the goals of the team, the host missionaries or Shalom, I will consent to return home at the direction of the team leader or any Board member of Shalom. I further will forfeit all funds contributed toward this trip (airfare, taxes, and training) for the sake of the overall goal of the remaining team members.

1. I hereby agree that while serving in the mission field, if any of my actions are found to be not in compliance with the goals of the team, the host missionaries or Shalom, in their sole discretion, I will consent to expulsion from the team and return home at the direction of the team.
2. I agree that all funds contributed toward this trip (airfare, taxes, and training, etc.) will be non-refundable and forfeited.
3. I hereby release Shalom Outreach, Inc. its board of directors, volunteers, staff and Executive Director from any and all liabilities associating with my expulsion and any other damages/losses that I may incur as a result of this mission trip.
4. Understanding that Shalom Outreach, Inc. is an international missions organization working to spread the Gospel of Jesus Christ, reaching the lost and reconciling man back to God, I hereby release, hold harmless, and indemnify Shalom Outreach, Inc. its board of directors, volunteers, staff, and Executive Director, and associates of and from any and every liability, claim, demand, right or cause of action, of whatever kind or nature, which may be asserted by reason of, on account of, or in any way growing out of any and all personal injuries, disease or the effects and/or consequences thereof, or damage to property or person. I consent to permit Shalom Outreach to use my image/photo or any other representation in an effort to advance and promote activities on behalf of their organization.

Volunteer's Signature: _____ Date: _____

List countries and dates of any previous overseas volunteer services:

PERSONAL TESTIMONY

Please use this section for your personal testimony (attach additional sheets if needed):

PASTORAL RECOMMENDATION

It is Shalom's desire to assemble dynamic teams of people in international missions to provide the most effective use of individual gifts for ministry. We also believe that foreign missions should serve as an extension of ministry that is also effective domestically. We ask you as the pastor of the applicant to provide your recommendation for participation in foreign missions. Please indicate areas of ministry that they are presently involved in that would be beneficial in missions.

Pastor's Name	Denomination:	Ordained to the Ministry:
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CHURCH RECOMMENDATION:

The _____ church of _____

Whole-heartedly recommend the above person to Shalom Outreach, Inc. as sound in his/her faith and spiritually equipped to serve on this volunteer project.

Pastor's Signature: _____ Date: _____