



East White Oak **SHORT TERM TEAM APPLICATION**

BIBLE CHURCH

Trip for which you are applying _____

I have spoken with a Team Leader or Mission Team Member: Yes No

1. Full name _____

2. Have you ever participated on an East White Oak mission team previously? Yes No
_____ Team

3. Date of birth: _____ Male Female

4. Marital Status: Married Single

5. Street Address: _____
City: _____ State: _____ Zip Code: _____

6. Home Phone: _____ / _____ Mobile Phone: _____ / _____

7. E-mail: _____

8. Passport Place/Date of issue: _____ Expiration Date: _____ (
Please leave a copy of passport page in EWO Office when on short term trip)

9. Do you attend a small group, ABF group, other group at EWO? Yes No
If so, which one(s)? _____

10. Do you serve in the church? Yes No
If so, what do you do? _____
Who is your ministry leader(s)? _____

11. **If you are not a member or regular attender of East White Oak, I agree with the following 3 statements:**

I agree with East White Oak's statement of faith.

I understand that I will provide 100% of the airfare to East White Oak before any ticket is purchased for me.

I will supply 100% of my funding for the trip, either by raising it from my own church family and contacts or from my own funds. If I do not provide this funding, I understand that I will not be allowed to continue on the team and that any funds that have been given may not be refunded.

12. Please give a brief account of your conversion and on-going relationship with Christ Jesus:

13. Have you ever shared the Gospel with someone? Yes No

14. Have you read and accepted the "Beliefs of EWO" Yes No I have questions about these.

15. Have you read and accepted the Team Covenant. Yes No I have questions about this.

(Please complete both sides)

16. Why do you want to go on this trip? _____

17. Is there any particular way you would like to serve on this trip, and what do you see as your strengths? _____

18. Primary means by which you plan to finance this trip:
 Personal funds Raise support from family and friends
 I would like some guidance with this.
19. Do you have health insurance that will cover you in the location to which you will be traveling:
 Yes No Company: _____ Policy No. _____
20. Describe any physical condition or health issue that could be affected by physical stresses or a lack of emergency services, or could limit your activities. _____

21. List any allergies: _____
 Prescription drugs you are taking: _____
 Blood type: _____
22. Emergency Contact:
 Name: _____ Relationship: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Cell Phone #: _____ E-mail address: _____

Release Form

If accepted for this short term mission trip, I will participate voluntarily and of my own free will. I will not hold team leaders or team members of East White Oak Bible Church responsible for any accident, personal injury, illness, or other personal loss that might result during or as a result of this trip. I authorize East White Oak team leader(s) to consent to any emergency treatment which would be deemed advisable in the event of an accident, injury, or illness. I will submit to team leadership and seek to maintain a cooperative spirit in all activities. To the best of my ability, I will participate in trip preparation and evaluation sessions. If I am receiving disability benefits, I will provide a letter from a physician stating activities in which I can participate.

_____ Signature

_____ Date

_____ Parental Permission (if under 18)

_____ Date

**Please return completed application to
 Mission Team Member
 EWIBC: 11922 E. 2000 North Road, Carlock, IL 61725
 (309) 454-3833**