

Hope For Appalachia Virginia Inc  
**Spring 2023 Mission Trip Application**



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|---|
| <b>Week #1: March 27 - April 1</b><br>(Teams: Wes, Terry, Amelia, Aniscia, Orange County, Nawrocki & Woody) |
| <b>Week #2: April 3 - 8</b> (Team Madison)  |

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| <b>\$155 Mission Trip Fee</b><br>Mission fee can be paid via PayPal or by check.<br><i>Mission Fee Includes Lodging &amp; Mission Trip T-Shirt</i> |
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**Application, Background Check and Mission Fee Due Wednesday, February 22nd**  
 Applications can be filled out, signed, scanned and emailed to hopeforappalachia.virginia@gmail.com or mailed to: Terry Graham, 28045 Sunnyside Road, Unionville, VA 22567. If paying by check, you can also include your check, made payable to "Hope for Appalachia Virginia Inc".

**Personal Information**

|   |                          |  |   |
|---|--------------------------|--|---|
| <b>Name</b>   | <b>Date of Birth</b>     | <b>Gender</b><br><input type="checkbox"/> Male <input type="checkbox"/> Female               | <b>Marital Status</b><br><input type="checkbox"/> Married <input type="checkbox"/> Single |
| <b>Mailing Address</b>                              |                          |  |   |
| <b>Physical Address (if different from mailing)</b> |                          |  |   |
| <b>Cell Phone Number</b>                            | <b>Home Phone Number</b> | <b>Do you have Facebook?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No     |   |
| <b>Email Address</b>                                |                          | <b>Do you have FB Messenger?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No |   |

**Mission Team / Travel Information**

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|---|
| <b>Team / Team Leader Request</b> <i>(leave blank if you don't know)</i>  |
| <b>The Spring Mission Trip has two travel week opportunities. I can travel:</b><br><input type="checkbox"/> Week #1: March 27 - April 1 <input type="checkbox"/> Week #2: April 3 - 8 |

**Each Missionary will receive one Hope for Appalachia t-shirt with your mission fee. Please select the size you want.**

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| Adult Sizes: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL <input type="checkbox"/> 4XL <input type="checkbox"/> 5XL |
| Youth Sizes: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> XL   |

**Parent / Guardian Information (for applicants under the age of 18)**

|                               |                   |
|-------------------------------|-------------------|
| <b>Parent / Guardian Name</b> | <b>Cell Phone</b> |
| <b>Mailing Address</b>        |                   |
| <b>Email Address</b>          | <b>Home Phone</b> |

**Emergency Contact Information**

|                   |                     |
|-------------------|---------------------|
| <b>Name</b>       | <b>Relationship</b> |
| <b>Cell Phone</b> | <b>Home Phone</b>   |

### Medical Information

Do you have any allergies?  Yes  No *If YES, please explain:*

Do you have any medical or emotional conditions that might hinder you as a team member?  Yes  No

*If YES, please explain:*

### Church Information

Are you a member of a church?  Yes  No  No **Are you a Christian?**  Yes  No

I attend church:  Regularly  Occasionally  Never  I don't have a home church

Name of the church you attend

How many years have you attended? Pastors Name

Church Address

What ministries are you involved in at your church?

Do you volunteer or serve in any ministries outside your church?

Have you served on any short term mission trips?

Our mission trip offers many opportunities to share the Lord with others. Please write a brief testimony of your christian life and how you became a christian. Include a description of your past and present relationship with the Lord and how you see your future with God. *(Use a separate sheet of paper if necessary)*

Have you been trained in personal evangelism?  Yes  No

Please provide a reference, not family, that knows you and your spiritual walk.

Name: Phone Number:

**Education / Gifts Information**

**Special Skills / Talents?** (photography, teacher, public speaking, construction, truck driver, tech savvy, play musical instrument, singing, cook, etc, ... )

**Education**

**Professional Experiences**

**Acknowledgements / Signature**

I agree to fulfill my financial obligation by paying the Mission Fee, understanding refunds are not guaranteed.

Initials \_\_\_\_\_

I agree to prepare and send support letters (prayer and financial) to friends and family

Initials \_\_\_\_\_

By submitting my application, I verify the information provided in the application is accurate and complete to the best of my knowledge.

Signature

Date

**Waiver & Release / Assumption of Liability Form**

I, \_\_\_\_\_ (print your legal name), am participating in a mission trip sponsored by HOPE FOR APPALACHIA VA TEAM, INC; I understand this journey will involve the following:

Hope for Appalachia – Personal Evangelism and Delivery of Hope Boxes

**Certification of Capability to Participate and Understanding of Risks/Assumption of Risks:**

My signature on this form is my certification that I am physically capable of engaging in the activity of event described above. Further, I acknowledge that I have had the risks of my participating in this activity or event sufficiently explained to me, and I understand the risks posed in this activity or event (or I have declined such explanation because I already understand the risks involved in this activity or event). In exchange for the privilege of participating in this church-sponsored activity or event, I hereby assume all risks of injury or damages of whatever type or form associated with my participation in this activity or event.

Signature

Date

Printed Name

## Consent to Treatment

My signature on this form constitutes my consent for the trip sponsors to consent to medical providers diagnosing and providing medical treatment to me at my expense in the event of injury or illness requiring emergency or other medical treatment while involved in this activity or associated with the activity.

I waive any claims or causes of action, including attorney's fees that I might have against Hope for Appalachia Va. Team, Inc. for my participation.

Signature

Date

Printed Name

## Mission Journey Covenant

I am willing to be a part of a team, to place myself under the direction and leadership of the team leader, and to accept his/her guidance during the planning phase and while on this mission journey. I understand that team members must be flexible while serving on the field. Even though the mission team will be prepared for the trip, there are many times when unexpected events will arise.

I commit to see obstacles as opportunities to see God overcome barriers and understand that by remaining flexible, the team will be able to work through these events successfully. I fully understand that I will be representing Jesus Christ, Hope for Appalachia, and my home church. Our object is to serve through our mission partnerships in a Christ-honoring way.

**As a team member, I agree to the following Code of Conduct while serving on the field:**

- Abstain from alcohol use
- Dress in an appropriate and modest manner
- Respect our partner church(es)/missionary • Be culturally sensitive at all times

**In the event that I do NOT follow the Code of Conduct, the following may occur:**

- My activity on the field may be reduced
- I may be sent home, and will be responsible for all additional costs incurred
- I may not be able to serve on future mission trip

Signature

Date

Printed Name

# Prayer Partners

Prayer support is a key ingredient for each Mission Journey. We would like for you to enlist 10 Prayer Partners who will commit to pray for you and our team as we prepare and go on our journey. While on mission, please invite them to follow us on our Facebook page for journey updates:

*Please return this Prayer Partners List to Pastor Mike before you leave on the Mission Trip.*

Your Name

## My List of Prayer Partners

1. Name of Prayer Partner

2. Name of Prayer Partner

3. Name of Prayer Partner

4. Name of Prayer Partner

5. Name of Prayer Partner

6. Name of Prayer Partner

7. Name of Prayer Partner

8. Name of Prayer Partner

9. Name of Prayer Partner

10. Name of Prayer Partner