

Spring 2026 Mission Trip Application



TRIP DATES	Monday, March 23rd - Saturday, March 28th
	(Teams: Amelia, Aniscia, Dodson, Nawrocki, Orange, Terry, Wes)
	Monday, March 30th - Saturday, April 4th (Team Woody)
	Monday, April 6th - Saturday, April 11th (Team Madison)

MISSION FEE	\$190 Mission Trip Fee (Teams: Amelia, Aniscia, Dodson, Madison, Nawrocki, Orange, Terry, Wes)
	\$290 Mission Trip Fee (Team Woody: All three meals included)
	Mission fees can be paid via PayPal or by check.
	Checks can be made payable to "Hope for Appalachia Virginia Inc"
	For PayPal, you can use the Mission Fee link on our website on the "Traveling Missionaries" page. If you need assistance in paying the mission fee, or need more time to pay, please reach out to Pastor Mike.

Application, Background Check and Mission Fee Due: Friday, February 20th
Applications can be filled out, signed, scanned and emailed to hopeforappalachia.virginia@gmail.com OR paper copies and checks can be mailed to: Jessica Meredith, 6309 White Oak Lane, Jeffersonton VA 22724.

Personal Information		
Name		Date of Birth
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow	
Mailing Address		
Physical Address (if different from mailing)		
Cell Phone Number	Home Phone Number	
Email Address		
Do you have Facebook Messenger? We have team chat groups.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Name on Facebook Messenger (if different from above)		

Mission Team / Travel Information
Team / Team Leader Request (leave blank if you don't know)
<input type="checkbox"/> I am flexible to serve on any team.
<input type="checkbox"/> I have transportation arranged to get to Kentucky.
<input type="checkbox"/> I will need to carpool with someone to travel to Kentucky.
<input type="checkbox"/> I have space in my vehicle if someone needs a ride. Number of seats available: _____

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

If we do not receive your application by **February 20th**, we cannot guarantee you will receive an HFA t-shirt.

You may order additional t-shirts, hoodies, hats, etc from our vendor by visiting hfavateam.com.

Parent / Guardian Information (for applicants under the age of 18)		
Parent / Guardian Name		Cell Phone
Email Address		Home Phone
Add Parent to the Email Distribution List	<input type="checkbox"/> Yes <input type="checkbox"/> No	Email:
Add Parent to the Facebook Messenger Team Group Chat	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name on Facebook:

Emergency Contact Information		
Name		Relationship
Cell Phone	Home Phone	

Medical Information	
Do you have any allergies? (other than seasonal)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please explain:</i>
<p>To best serve the schools in Kentucky, missionaries should be prepared for physical tasks like climbing stairs, carrying boxes and supplies, and sitting on the floor with students. If you have any physical limitations or health concerns that might affect your participation, please contact Pastor Mike prior to applying. We're happy to discuss how we can best support your involvement.</p>	
Do you have any medical or emotional conditions that might hinder you as a team member? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If YES, please explain:</i>	

Education / Gifts Information	
Special Skills / Talents? (photography, teacher, public speaking, construction, truck driver, tech savvy, play musical instrument, singing, cook, etc, ...)	
Professional Experiences	
Do you own a truck that can pull a trailer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have experience pulling a trailer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you own or have access to a trailer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, # years experience pulling trailer: _____	
Length of trailers previously pulled: _____	

Church Information			
Are you a member of a church?		<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a Christian? <input type="checkbox"/> Yes <input type="checkbox"/> No
I attend church:		<input type="checkbox"/> Regularly <input type="checkbox"/> Occasionally <input type="checkbox"/> Never <input type="checkbox"/> 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?			
<p>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. <u>Use a separate sheet of paper if necessary. For returning missionaries, please consider typing out your testimony and attaching a copy to the application! We do NOT keep copies of past applications for quick reference.</u></p>			
Have you been trained in personal evangelism?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please provide a reference, not family, that knows you and your spiritual walk.			
Name:		Phone Number:	

Mission Journey Covenant

Please initial next to each item to indicate you have read and agree.

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.	Initials _____
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.	Initials _____
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.	Initials _____
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.	Initials _____
As a team member, I agree to the following Code of Conduct while serving on the field: <ul style="list-style-type: none"> Abstain from alcohol use Dress in an appropriate and modest manner Respect our partner church(es)/missionary Be culturally sensitive at all times 	Initials _____
I agree to fulfill my financial obligation by paying the Mission Fee, understanding refunds are NOT guaranteed.	Initials _____
I agree to NOT contact any of the schools we are visiting to include staff members (not applicable to team leaders).	Initials _____
I agree to NOT contact any of the lodging locations (not applicable to team leaders).	Initials _____
I agree to NOT hand out any pamphlets, website addresses, blogs, podcasts, etc. to any students or staff, that are not approved, in advance, by Pastor Mike.	Initials _____
I agree to NOT add any student or staff to social media or exchange contact information such as email or phone numbers.	Initials _____
I agree to participate in all scheduled mission trip meetings. Should I be unable to attend in person, I will watch the recording before traveling to Kentucky. I also acknowledge my responsibility to complete all training videos prior to the start of the trip.	Initials _____
I agree to attend the entirety of the planned mission trip. In the event of an emergency and I need to leave early (or not attend), I will talk to my team leader AND Pastor Mike to make sure all responsibilities and exit tasks are covered and taken care of.	Initials _____
I acknowledge that this mission trip is a service-oriented endeavor rather than a leisure trip. I am aware that accommodations are basic and specific lodging requests cannot be guaranteed. If you require special lodging accommodations, please contact Pastor Mike in advance.	Initials _____
I agree to prepare and send support letters (prayer and/or financial) to friends and family.	Initials _____
In the event that I do NOT follow the Code of Conduct, the following may occur: <ul style="list-style-type: none"> 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 	Initials _____
To ensure the best possible experience for our teams and the communities we serve, Hope for Appalachia Virginia, Inc. retains final authority regarding participant approval for all mission trips.	Initials _____
Signature	Date
Printed Name	

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 Virginia Inc. for my participation.

Signature

Date

Printed Name

Acknowledgements / Signature

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

Signature

Date

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