



INTERNATIONAL OUTREACH APPLICATION

(PLEASE PRINT. USE BLACK INK. ANSWER ALL QUESTIONS. MAIL TO ADDRESS BELOW.)

2598 Rice Street • St. Paul, MN 55113 • Ph: 651.484.3010 • Missions@WorldEncounter.org

Please Enclose Two Passport Photos (2" x 2") with Your Application

Name _____
Last First (FULL LEGAL) Middle

(NOTE: Your Legal First, Middle and Last Names MUST Match Your Passport)

Permanent Address _____
Street, Box, RR City State Zip

Temporary Address _____
(MUST be completed if this is college address. Check if info is to be sent to temporary address)

Telephone (____) _____ (____) _____ (____) _____
Home Work/Other Mobile Phone

E-mail Address: _____

Age _____ Birthday _____ Citizen of _____ Birthplace _____
Country Country

Sex ____ Marital Status: Single Married Widowed Remarried Separated Divorced
(World Encounter does not discriminate based on marital status.)

Education _____
Degrees/Certifications Institution

Occupation _____
Title Description

Emergency Contact Information

In Case of Emergency Contact _____

Address _____
Street, Box, RR City State Zip

Telephone (____) _____ (____) _____
Home Other

Please Describe Your Physical Health, Including Any Physical or Dietary Limitations You May Have. Height ____ Weight ____

Are You on Any Regular Medication or Currently Under a Doctor's Care? (Yes No) If Yes, Please Explain. _____

My Primary Health Insurance Carrier Is:

Insurance Company _____ Policy # _____

Do You Have a Current Passport (Good Through the Trip Plus 6 Months)? (Yes No) Place of Issue: _____

Issue Date: ____/____/____/____ Expiration Date: ____/____/____/____ Date of Birth: ____/____/____

What Nationality is Your Passport? _____ Passport Number: _____

Outreach You Are Applying For _____

Experience

Previous Missions Experience (If None, Describe Contact With Racial, Ethnic, or Cultural Groups Other Than Your Own)

What Foreign Language Abilities Do You Have? _____

Check Any of the Following With Which You Have Experience:

Bible Study Leader Teaching Preaching Evangelism Small Groups Youth Ministry

Children's Ministry Drama Dance Mime Puppets Worship Music

VBS/Sunday School Photography Construction Vocal Music Musical Instruments _____

Other Applicable Ministry and Work Experience (Please Explain): _____

Honestly Rate Your Personal Strengths and Weaknesses on a Scale of 1 to 5 (5 = Strongest).

_____ Relating to Other Age Groups

_____ Public Speaking

_____ Problem-solving

_____ Following Instruction

_____ Confrontation (Giving/Receiving)

_____ Submission to Authority

_____ Adjusting to Foreign Cultures or Difficult Living Conditions

Comments: _____

Home Church _____

Name of Church / Worship Site

Pastor's Name

Phone Number

Street/Box/RR

City

State

Zip

Name of Person Willing to Spend Time Listening and Asking You Questions After Your Trip. _____

How Do You Plan to Raise Funds for This Outreach?

Personal Savings Fundraising/Donations Other

Please Explain: _____

Are You Willing to Refrain from the Use of Tobacco and Alcohol for the Duration of the Outreach. (Yes No)

Are You Prepared to Rough it on the Mission Field? (Yes No) Explain if Necessary. _____

Are You Able to Walk Several Miles? (Yes No) Explain if Necessary. _____

Is There Anything Else We Should Know About You? _____

What One Specific Thing do You Hope to do or Experience While on Outreach? _____

Please Describe Your Relationship with Jesus. _____

I AM A CHRISTIAN AND AGREE AND BELIEVE THAT THE BIBLE COMMANDS ME TO MAKE EVERY EFFORT TO LIVE AT PEACE AND TO RESOLVE DISPUTES IN PRIVATE OR WITHIN THE CHRISTIAN CHURCH. I FURTHER ACKNOWLEDGE MY CONCERN THAT THE LIMITED CHARITABLE RESOURCES OF WORLD ENCOUNTER SHOULD NOT HAVE TO BE DISSIPATED ON WASTEFUL LITIGATION. THEREFORE I EXPRESSLY WAIVE MY RIGHT TO FILE A LAWSUIT IN ANY CIVIL COURT AGAINST WORLD ENCOUNTER AND OTHER ORGANIZATIONS AND ALL INDIVIDUALS INVOLVED WITH THIS MISSION TRIP.

I HEREBY RELEASE ALL LEADERS AND ORGANIZATIONS INVOLVED WITH THIS MISSION TRIP FROM ANY AND ALL LEGAL LIABILITY. I HEREBY WAIVE ALL MY RIGHTS TO ANY LEGAL LIABILITY, ON THE PART OF WORLD ENCOUNTER OR ANY OTHER INDIVIDUALS OR ORGANIZATIONS INVOLVED, WHICH LIABILITY MAY RESULT FROM SICKNESS, INJURY, OR DEATH THAT MAY OCCUR ON OR RELATED TO THIS TRIP. I FULLY REALIZE THAT THERE ARE HAZARDS, AND I AM FULLY ASSUMING THESE RISKS, INCLUDING BUT NOT LIMITED TO, HAZARDOUS TRAFFIC, POORLY CONSTRUCTED ROADS, DANGERS RESULTING FROM MILITARY OR POLITICAL PROBLEMS, SICKNESS, AND DISEASE. I SPECIFICALLY RELEASE WORLD ENCOUNTER AND ALL CONCERNED FROM ANY CLAIM OF NEGLIGENCE IN THEIR DUTIES AS LEADERS, OR OTHERWISE, ON THIS MISSION TRIP. IN THE EVENT THAT I ATTEMPT TO MAKE A CLAIM IN VIOLATION OF MY RELEASE AND WAIVER AS HEREIN INDICATED, I HEREBY AGREE TO, AND SHALL PAY, ALL LEGAL FEES AND COSTS INCURRED BY WORLD ENCOUNTER AND OTHER INDIVIDUALS AND ORGANIZATIONS INVOLVED. I FURTHER AGREE THAT SUCH CLAIM OR DISPUTE ARISING FROM OR RELATED TO THE MISSION TRIP SHALL BE SETTLED BY BIBLICALLY-BASED MEDIATION (AS SPECIFICALLY DESCRIBED IN THE THEN CURRENT RULES OF PROCEDURE FOR CHRISTIAN CONCILIATION OF THE INSTITUTE FOR CHRISTIAN CONCILIATION 1-416-256-1583), AND IF NECESSARY BY LEGALLY BINDING ARBITRATION IN ACCORDANCE WITH THE AFOREMENTIONED RULES OF PROCEDURE FOR CHRISTIAN CONCILIATION.

I HEREBY FURTHER ACKNOWLEDGE MY RESPONSIBILITY TO PROVIDE MY OWN PRIMARY HEALTH INSURANCE COVERAGE, INCLUDING BUT NOT LIMITED TO MEDICAL, HOSPITALIZATION, LIFE, DISABILITY, DEATH, LOST OR STOLEN PERSONAL PROPERTY, AND ANY AND ALL OTHER INSURANCE WHICH I MAY NEED OR DESIRE. I ALSO HEREBY RELEASE WORLD ENCOUNTER AND ALL LEADERS AND ORGANIZATIONS INVOLVED WITH THIS MISSION TRIP FROM RESPONSIBILITY TO PROVIDE INSURANCE COVERAGE. (SPECIAL TRAVEL INSURANCE IS REQUIRED FOR ALL PARTICIPANTS. PREMIUM COSTS ARE THE RESPONSIBILITY OF THE TEAM MEMBER.)

I HEREBY FURTHER AUTHORIZE THE LEADERSHIP OF WORLD ENCOUNTER TO MAKE ESSENTIAL DECISIONS ON MY BEHALF WITH RESPECT TO MEDICAL TREATMENT, EMERGENCY SURGERY, OR HOSPITALIZATION, SHOULD SUCH BE NECESSARY ON THE TRIP. HOWEVER, WORLD ENCOUNTER SHALL IN NO WAY BE RESPONSIBLE OR LIABLE FOR PAYMENT OF ANY AND ALL BILLS FOR SUCH MEDICAL TREATMENT. I ASSUME THE FULL RESPONSIBILITY FOR ANY AND ALL MEDICAL BILLS INCURRED RELATED TO THIS MISSION TRIP UNDER MY PRIMARY INSURANCE COVERAGE. MY ESTATE AND MY FAMILY SHALL FURTHER ASSUME FULL AND TOTAL COST FOR THE RETURN SHIPPING OF MY BODY SHOULD I DIE BY ANY CAUSE ON THIS TRIP.

I HEREBY FURTHER AUTHORIZE THE USE OF ANY PHOTOGRAPHY, VIDEO OR AUDIO I MAY APPEAR IN AS PART OF THE OUTREACH, PREPARATION OR ACTIVITIES CONDUCTED BY WORLD ENCOUNTER.

I AGREE TO READ AND ABIDE BY ALL RULES, REGULATIONS, AND GUIDELINES SET FORTH IN WORLD ENCOUNTER TRAINING AND TRAINING MATERIALS, AND TO ABIDE BY DECISIONS MADE BY LEADERS AND THOSE IN AUTHORITY.

Initial either "Yes" or "No" below.

_____ Yes _____ No I have read and am in full agreement with the release and waiver of the above Statements of Liability Release, and fully understand that I am waiving any rights I may have to litigate and sue; accepting full responsibility for all insurance and all medical costs; authorizing World Encounter to make medical decisions if necessary; and agreeing to read and abide by all World Encounter rules.

Signature _____
(Applicant Signature)

Date _____

Signature _____
(Parents or Legal Guardians for a Minor)

Date _____

WORLD ENCOUNTER
Liability Release and Waiver

Name of Participant: _____

Name of Parent(s) or Legal Guardian: _____

Please note (or attach on a separate sheet) any medical information or conditions which the tour leaders should be aware of: _____

The undersigned hereby acknowledge and understand that each Participant on the World Encounter outreach trip is voluntarily engaging in activities that involve risk of injury or illness (even catastrophic injury or illness) which might result not only from their own actions, inactions or negligence, but the actions, inactions or negligence of others, or the existing conditions of the country they will be visiting, and further, that there may be risks which are not known to the trip organizers or which are not yet reasonably foreseeable.

The undersigned hereby assume all of the foregoing risks as a condition of participation and accept personal responsibility for all damages following any such injury or illness, and intending to be legally bound, do for themselves, their personal representative and heirs, hereby agree not to bring any legal action against, and hereby release, waive, and unconditionally discharge the trip organizers, World Encounter, its administrators, officers, directors, employees or volunteers which are associated with this trip, from any and all claims, demands, expenses, losses or damages which may be incurred on account of any injury or illness occurring on this trip, including death or damage to property, and also including that which may be caused or alleged to be caused in whole or in part by the negligence of any of the above mentioned persons.

The undersigned hereby certifies that the Participant is covered by the submitted health insurance policy and accepts the potential costs for treatment that may or may not be covered by the stated insurance policy. The undersigned has read the above waiver and understands that by voluntarily signing it, the undersigned has given up substantial rights.

The above named Participant (ir a minor) has my permission to participate on the outreach trip with staff members or leaders of World Encounter during the period from _____ through _____, 200__.

(Signature of Parent or Legal Guardian) Date: _____

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Participant hereby agrees to abide by the rules set by the trip leaders, and will accept the consequences for inappropriate behavior, including, if deemed necessary, being sent home at their own expense.

(Signature of Participant) Date: _____

Checklist

- Application Form Submitted
- Liability Release and Waiver Form Submitted
- Two Passport Photos Submitted
- Must Have a Passport which is Valid for Six Months Beyond Outreach Return Date
- One Copy of First 2 Pages (picture and signature pages) of your **Signed** Passport Submitted

(Many countries require a Travel Entry Visa in order to visit. In such cases you may need to submit your passport to World Encounter for the application process. Please do not submit passport until requested under separate cover. You will be notified if Travel Entry Visas are required.)