

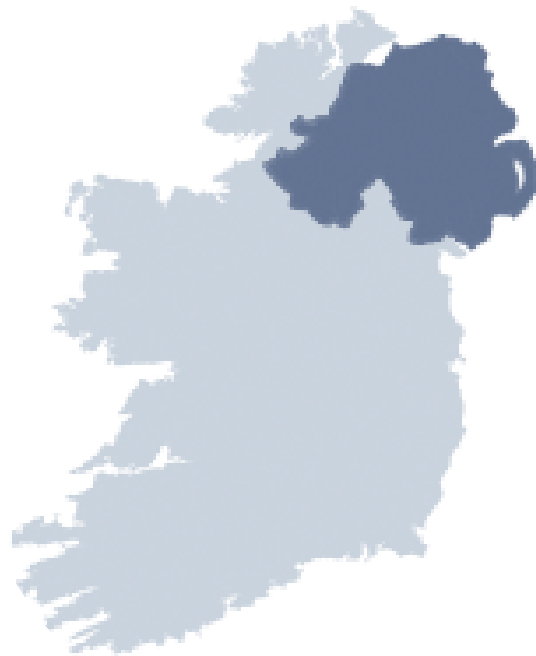
BF Youth Group

Mission Trip

Application

Northern Ireland 2017

June 23 - July 3, 2017



Bible Fellowship Church

725 OXFORD VALLEY ROAD | YARDLEY, PA 19067 | 215-321-3326

F.A.Q.'s for the Mission Trip

1. *What is the purpose?*

We will primarily minister in Rathfriland. This small village has invited us to come and reach the young people in their area. We will be hosted by the Murlough House. From this location, American Teams go out to serve in area public schools, parks, and churches. "Project Evangelism" has a number of links with the local community. We will seek to build relationships as well as share the Gospel with children, teens and adults.

2. *What will we be doing?*

We plan to be involved in some or all of the following: children's ministries, soccer clinics, religious education classes, public school assemblies, classrooms, and open-air gospel concerts.

3. *How much will the trip cost?*

The trip will cost \$1500 per individual. The cost of the trip for each student includes airfare, ground transportation, food and lodging

4. *Are there meetings prior to the trip?*

The seven meetings will take place at BFC on Friday nights from 6:30-8:30pm, on December 16th, January 13th, February 17th, March 17th, April 21st, May 19th, and June 9th

5. *What if I cannot commit to all of the dates?*

Since this is a team, we need you to commit to every meeting. If you cannot make the meetings it will affect you and the rest of the team. Our goal is for you to make this group your priority. If you cannot commit to come for the seven meetings then please do not apply to the team.

6. *Do I need parental approval?*

A parent or guardian must sign your application so they can help keep you accountable and remain active in the group.

Youth Mission Trip Application

Name: _____

Today's Date: _____

Cell #: _____

Email: _____

School: _____

Grade: _____

Do you attend services at BFC? _____

How often a month? (circle one) 1 2 3 4

Which service time(s)? _____

Do you have a passport? Yes or No (circle one). If Yes, what is the expiration date? _____

Strengths/Weaknesses:

What are some *practical skills* that you have and enjoy?

What are some *strengths* that you or others have seen in your life?

What are some *weaknesses* that you or others have seen in your life?

Are you a Christian? _____

If yes, how do you know you are a Christian?

Have you ever been on a mission trip before? If yes, where and when?

Why do you want to come on the mission trip?

What do you expect to gain from this trip?

Activity Participation Agreement

Activity Information

Group: Youth Ministry Date(s) of Activity: see below

Group Leader: Jeremy McAlack Phone: 267-337-4134

Staff Oversight: Jeremy McAlack, Youth Pastor

Location and Details of Activities:

Youth Group Mission Trip:
Northern Ireland—June 23rd - July 3rd, 2017

Participant Information

(Parent / authorized guardian – please complete)

Name of participant: _____ Home Phone: _____

Address: _____

Name of emergency contact: _____ Relationship: _____

We should try to reach you in the following order:

1. _____ 2. _____ 3. _____
Please circle: Home / Work / Cell Home / Work / Cell Home / Work / Cell

Additional emergency contact: _____ Phone: _____

Is sponsor authorized to approve medical and dental treatment? Yes No

Is participant covered by personal / family medical / dental insurance? Yes No

If yes, name of insurer(s): _____ Policy or group #: _____

Please list any allergies, required medications, or pre-existing medical conditions or concerns we should be aware of:

Participant Agreement

By signing below, I the participant (parent/guardian, if participant is a minor) acknowledge and accept the risks of any physical injury associated with participation in the activity describe above. To the fullest extent permitted by law, I release Bible Fellowship, any and all of its representatives from any injury, harm, damage or death which may occur to myself or my minor child while participating in the activity and agree to save and hold harmless Bible Fellowship, any and all of its representatives from any claims arising out of myself or my minor child's participation in the activity.

I, the participant (or parent/guardian) accept personal financial responsibility for any bodily or personal injury sustained during the activity. If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process. In the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give permission to the attending physician to treat my minor child. For myself or as parent or legal guardian, I understand that I am responsible for the health care decisions of my minor child and agree that my insurance plan is the primary plan to pay for the medical, dental, or hospital care or treatment that is given to my minor child. Any insurance policy of the church or organization sponsoring this event will be used as the secondary coverage.

If suspicion arises, I hereby give the representatives of Bible Fellowship, paid and/or volunteer staff, permission to search the above-mentioned child's belongings for controlled substances or weapons.

I also understand that pictures, video recordings, and audio recordings of my child may be made at this event for use on Bible Fellowship's website or other promotional materials.

Note: BFC will staff this activity with adults who have been certified through our KidsSafe Child Protection Policy. However, please note that if this is a large, open activity, there may be outside adults (i.e., family members) joining the group for this activity who would not have met those requirements.

Signature: _____ Date: _____
(Participant or parent / guardian, if participant is a minor)

----- Parent Tear-Off -----

Group: Youth Ministry Date(s) of Activity: _____

Group Leader: Jeremy McAlack Phone: 267-337-4134

Staff Oversight: Jeremy McAlack, Youth Pastor

Student-Parent/Guardian Commitment

I will make this team a priority in my life and will commit to being on time and attending each meeting.

Student signature: _____

I will commit to being an example to the other youth group students by practicing what I learn.

Student signature: _____

I will commit to the hard work so that I might be refined in my spiritual life.

Student signature: _____

I will encourage my child to participate in youth group and will help make sure my child is on time and committed to attend every meeting.

Parent/Guardian signature: _____

I will help my child accomplish any homework and encourage the spiritual growth in my child.

Parent/Guardian signature: _____