Calvary Church Impact Trip Application

This application must be completed by all who are applying for a Calvary Church Impact trip. To be accepted as a team member to go on an Impact trip, you must turn in this application and the deposit by the trip's deadline (checks payable to Calvary Church). There is no guarantee of available spaces after the deadline for your trip.

This information can be found at **calvarychurch.us/about/outreach/**

QUESTIONS Vonn Dornbush / 651.558.2603 / vonn.dornbush@calvarychurch.us

NAME OF TRIP		DATES OF TRIP	
Name (first, middle, last)		Today's date	
Date of Birth		🗖 Male 🗖 Female	
Address			
City	State	Zip	
Phone (Home)	(Cell)		
Email			
OVERSEA TRIP ONLY Frequent Flyer (American)	Frequent	Flyer (Delta)	
Passport Number & Expiration Date			
I have been a 🛛 member 🏾 attender of Calvary for	_year(s) 🛛 Othe	۲ <u></u>	
Name of staff or other Calvary reference			
Describe your involvement at Calvary Church			
Describe your spiritual relationship with God and your s	alvation experienc	ce	
Since giving your life to Christ, what do you do on a regi	ular basis to grow	in your faith?	
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What talents or gifts do you have that you feel the Lord can use on this trip?_____

What language experience or previous cross-cultural experience do you have? _____

What aspects of this trip are you most excited about? _____

You will need to raise your own support for this trip. We will provide preparation and fundraising opportunities to help raise your support. Are you committed to this process and willing to trust God's direction through the results? Yes No

By signing this application, I recognize I am responsible to raise my own financial support for this trip. If I am unable to raise the total amount, I understand that I will be required to pay the remaining balance. Should I choose not to go on this trip, I am still fully responsible for all non-refundable costs incurred (e.g. airfare, already-purchased food, housing costs). Furthermore, should external factors change our plans for this trip, I recognize that some funds may not be refundable.

I am agreeing to be a team player on this trip and do whatever it takes to serve others, honor God, and share Jesus' love through my words and actions.

Signature	Date
For Parents/Guardians of Applicants under age 18: Additionally, I commit to pray for and support my of for this trip.	I agree to the above financial responsibilities. child as he/she prepares spiritually, mentally, and physically
Parent/Guardian Signature	Date

Please return form to:					
Calvary Church	OR	Send email to: bonnie.johnson@calvarychurch.us			
Attn: Bonnie Johnson					
2120 Lexington Ave N / Ros	seville, MN {	55113	FOR OFFICE USE ONLY		

□ Approved □ Not approved