



## **- SHORT TERM MISSION TRIP APPLICATION PACKET -**

Thank you for your interest in a Legacy Church short-term missions trip! In this packet you will find:

- Policies and Procedures
- Team Member Application
- Financial Policy and Procedures
- Medical Information Form
- Emergency Release Form
- Release of Liability Form
- Release of Liability for Minors Form

Please print and provide your signature in the areas noted.

Once completed, please turn in your completed and signed forms and application along with the required \$200 trip deposit payable to Legacy Church. Applications can be turned in at the Legacy Church office, [missions@legacychurch.org](mailto:missions@legacychurch.org), or mailed to:

Legacy Church  
Attn: Missions  
5333 Independence Pkwy  
Plano, TX 75023

If you have any questions about this document or short-term mission trip ministry at Legacy Church, please send inquiries to: [missions@legacychurch.org](mailto:missions@legacychurch.org).

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Policies and Procedures

If you are interested in participating in a short term mission trip with Legacy Church, please read the following:

- 1) Each applicant applying for a short-term mission trip must fill out an application and complete each individual section. This includes spouses and children (must be 16 and older).
- 2) Send application or questions to [missions@legacychurch.org](mailto:missions@legacychurch.org).
- 3) Acceptance to go on a trip is not guaranteed. Acceptance of a trip is dependent on multiple factors including trip capacity, skill sets, ministry gifts, experience, etc. Priority will be given to Legacy Church members. As part of the application process, trip leaders may choose to hold informational interviews with the candidates applying. Should you not be selected for a trip, your \$200 deposit will be refunded; this is the only reason a refund would be provided.
- 4) Upon approval of the application, the trip leader will provide further information about the next preparation steps. NOTE: DO NOT solicit any funds for support and/or make any commitments on behalf of Legacy Church without prior approval.
- 5) Applicants must be at least 16 years of age unless otherwise noted for a specific trip. All applicants under 18 must receive parental approval.
- 6) Team members are expected to attend all mandatory team training meetings.
- 7) Short-term mission trips can be rewarding and life-changing; however, they can also be stressful. Please consider factors in your personal life at this time that may distract and prohibit you from fully committing to the mission of the trip and adapting to unusual conditions.
- 8) If you have physical limitations, please apply for a trip you are physically able to participate in. Some trips may be prohibitive for certain physical conditions. Please discuss with the team leader if you have concerns.
- 9) Team members assume responsibility for their personal belongings on the trip. Legacy Church will not reimburse team members for items that are lost, stolen, or confiscated during the trip.

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application

Application Date: \_\_\_\_\_

Mission Location: \_\_\_\_\_ Trip Dates: \_\_\_\_\_

### Personal Information

Please type or print FULL LEGAL NAME (as it appears on your passport) legibly in black ink

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Preferred Name: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

SSN (only if needed, e.g. India): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt No.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Passport Information

Country: \_\_\_\_\_ Passport Number: \_\_\_\_\_

Issue Date: \_\_\_\_\_ Place of Issue (if shown on passport): \_\_\_\_\_

Exp Date: \_\_\_\_\_

### Flight Information (If Applicable):

Award Member Airline(s) and Number(s): \_\_\_\_\_

TSA Number: \_\_\_\_\_ Seat Pref (Window, Middle, Aisle): \_\_\_\_\_

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application (continued)

### Relationship to Legacy Church

Check one and complete the required information.

- Member since: \_\_\_\_\_ (mo/yr)
- Regular attender and active in church since: \_\_\_\_\_ (mo/yr)
- Occasional or non-involved attender
- Involved in another church. Specify church: \_\_\_\_\_

Are you in a Life Group?

- Yes                      Leader's Name: \_\_\_\_\_
- No

List Legacy Church ministries you have been involved with past and present. Please provide dates and ministry leader.

List Legacy Church Pastors, staff members, Leadership Team members, or Life Group Leaders who could serve as references:

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application (continued)

### Personal Background

Describe how you came to trust Jesus Christ as your Savior. (You may use additional sheets of paper if needed)

Share the Gospel message in your own words and understanding. (You may use additional sheets of paper if needed)

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Ministry Experience and Spiritual Gifts

List any cross-cultural and short-term mission experience.

What gifts, talents, abilities, and professional skills do you have that might contribute to your ministry on a short-term mission trip?

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application (continued)

### Ministry Experience and Spiritual Gifts (continued)

If you have taken spiritual gifts assessment, what are your top three spiritual gifts? If you have not taken a recent assessment, use the *Spiritual Gift Survey Tool* from Lifeway - <https://www.lifeway.com/en/articles/women-leadership-spiritual-gifts-growth-service>

Do you speak a language other than English? If so, please list along with fluency (i.e. a little, conversational, fluent):

Briefly explain what you hope to see the Lord do in and through you on this mission trip.

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application (continued)

### Ministry Experience and Spiritual Gifts (continued)

What do you do when you have a conflict with someone? How do you handle confrontation?

What are the realistic roadblocks that might keep you from going on a mission trip?

A mission trip requires a major time commitment. In addition to the trip itself, the team will meet multiple times for training in the eight weeks leading up to the trip dates.

Are you willing to commit to the necessary time requirements for this trip?

Yes

No

Are you willing to raise support for you and your team for this trip?

Yes

No



# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Team Member Application (continued)

### Application Signature Page

In submitting this application:

- 1) I have read and agree to the trip policies and procedures.
- 2) I whole-heartedly submit to the team leadership and will follow their direction and instructions.
- 3) I will, Lord willing, attend all training sessions and complete all training requirements.
- 4) I am confirming that I have the time and energy to devote to the pre, mid, and post-trip responsibilities.
- 5) I am willing to work under the direction of missionaries and national pastors to accept and to perform any and all assignments cheerfully and with a God-honoring attitude.
- 6) I will be flexible in my deportment; adjusting my demeanor, posture, and manner as needed.
- 7) I will agree to return home at my own expense if the team leader determines that my behavior is/has been inappropriate.

---

Participant's Name (Please Print)

---

Signature

---

Date

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Financial Policies and Procedures

### Payment Options

- To comply with the IRS, all checks should be made payable to Legacy Church
- All checks must include the participant's name and trip location in the memo line
- Online option: GoFundMe

### Trip Costs

Each team budget will contain a number of major expense categories. Examples may include airfare; vehicle rental; housing costs; food and drink; ministry materials; gifts for hosts; and more. Every effort is made to minimize costs without jeopardizing the quality, effectiveness, or safety of the ministry.

### Separate Itineraries

Separate itineraries arranged by the individual short-term participants are not allowed. Travel arrangements go much smoother if everyone has the same itinerary. Separate itineraries make it more complicated for planning and make it more difficult to arrange for group discounts. Separate itineraries also disrupt team bonding and unity. Exceptions may be made if a team member is staying for extended ministry reasons.

### Deposit Information

- A \$200 deposit is required with this application
- Make check payable to Legacy Church
- The \$200 deposit will go towards the total cost of your trip

### Team Member Contribution

Each short-term team participant should contribute at least 10% out of his/her own personal finances toward the cost of the trip. This includes the \$200 deposit (submitted at the time of application submission). Participants are encouraged not to contribute more than 50% of the cost of their trip, even if they have the finances to afford it.

### Payment Schedule:

- 120 days: \$200 trip deposit and application paperwork due
- 90 days: 50% of the balance due
- 30 days: Full payment due

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Financial Policies and Procedures (continued)

### Financial Memo of Understanding

- 1) I understand that I am responsible for raising 100% of the funds required for my trip, beyond what Legacy Church has already covered. The money I raise covers travel, food, lodging, exit taxes, ground transportation, and other expenses associated with the trip.
- 2) I am responsible for passport fees, souvenirs, immunizations, prayer letters, personal meals separate from the team, and some tourist-type events. Legacy Church will not be responsible for extra trip expenses (i.e. airline changes)
- 3) Financial donations made to Legacy Church for this mission trip are not mine; they belong to God and have been given to Legacy Church to accomplish the mission and work of the church.
- 4) If I do not ultimately participate on the mission trip to which I have been accepted, I am responsible for and will reimburse Legacy Church for any fees incurred as a result of my cancellation. (i.e. purchased airline tickets)
- 5) If I do not participate on the mission trip to which I have been accepted, I understand that the monies donated to my trip cannot be refunded to me or the donors due to the non-profit status of Legacy Church. All materials, including airline and other travel tickets, that have been purchased with donated funds cannot be transferred.
- 6) I understand if I do not meet the funding deadlines, I may not be allowed to go on the Missions trip. Any money raised will not be refunded, but will be applied to the current trip or other mission ministries.
- 7) If I raise an amount of money that exceeds my needs, the remaining money will be dispersed to other team members in need or used by Legacy Church for other financial needs associated with this mission trip or future ministry trips.
- 8) I agree to return home at my own expense if the team leadership determines that my behavior is/has been inappropriate. Money raised will not be refunded.

I have read and agree to the above policies, rules, and terms.

---

Participant's Name (Please Print)

---

Signature

---

Legal Guardian if under 18 (Please Print)

---

Signature

---

Date

**- SHORT TERM MISSION TRIP APPLICATION PACKET -**  
**Medical Information Form**

Participant Name: \_\_\_\_\_

**Insurance Information**

Insurance Company: \_\_\_\_\_

Policy Holder: \_\_\_\_\_ Relationship: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Insurance Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Physician Information**

Primary Care Physician: \_\_\_\_\_

Physician Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Emergency Contact**

Provide one contact that are not traveling with you. In case of emergency, please notify:

**Primary Name:** \_\_\_\_\_ Relationship: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Email: \_\_\_\_\_

**Alternate Name (optional):** \_\_\_\_\_ Relationship: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Email: \_\_\_\_\_

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Medical Information Form (continued)

### Health Details

Is your tetanus shot current?

Yes

Date of last tetanus shot: \_\_\_\_\_

No

List any allergies (foods, medications, bees, pollen, etc.) and reactions to these allergies:

List any special dietary needs and/or requirements:

Please list any medications you are currently taking:

Do you have any health problems that might hinder you during this mission trip? (e.g, back or chest pain, daily mandatory medical needs, physical or mental disability, etc.)

**- SHORT TERM MISSION TRIP APPLICATION PACKET -**  
**Emergency Medical Release Form**

Legacy Church Short Term Mission Teams and their appointed team leaders have my permission to authorize any medical treatment deemed necessary for me or my child by the aforementioned and the attending physician, including administration of medication, anesthesia, emergency surgery, or hospitalization. I agree to assume complete financial responsibility for all medical bills incurred by me or my child.

I agree to assume total financial responsibility to travel home immediately if it is necessary for medical or any other emergency reasons.

\_\_\_\_\_  
Participant's Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Legal Guardian if under 18 (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Release of Liability Form

In signing this form, I, \_\_\_\_\_, agree not to hold Legacy Church, its officers, employees, or other agents liable for any injury, loss, damage, or accident that I might sustain while on a missions event/effort.

I realize and acknowledge that my participation on a mission trip to a foreign country includes risk and possible dangers. I am well aware that my travel to such a foreign country exposes me to such risks as accidents, disease, war, political unrest, injury from construction projects, and other calamities.

I hereby assume any such risks that might result from my participation in any such missions project, and I unconditionally agree to hold Legacy Church, its officers, employees, or other agents harmless for any liability concerning my personal health and wellbeing, or any liability for my personal property that might be lost, damaged, or stolen while on a missions trip.

I hereby expressly forever release and discharge Legacy Church, its officers, employees, or agents from all such claims, demands, injuries, damages, or causes of action arising from any conduct on the part of Legacy Church, its officers, agents, or employees.

\_\_\_\_\_  
Participant's Name (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# - SHORT TERM MISSION TRIP APPLICATION PACKET -

## Release of Liability for Minors Form

In signing this form, I, \_\_\_\_\_ the parent and/or legal guardian of \_\_\_\_\_ (Participant's Name), agree not to hold Legacy Church, its officers, employees, or other agents liable for injury, loss, damage, or accident arising out of the church's negligence or that negligence of its officers, employees or other agents that I (and my minor children participating might sustain while on one of its mission trips to \_\_\_\_\_, from \_\_\_\_\_ (date) to \_\_\_\_\_ (date).

I realize and acknowledge that my (and my minor child's/children's) participation on a missions trip to a foreign country includes many risks and possible dangers. I am well aware that my travel to a foreign country exposes me to such risks as accidents, disease, war, political unrest, injury from construction projects, and other calamities.

I hereby assume risks that might result from my travel to a foreign country, and I agree to hold Legacy Church, its officers, employees, or other agents harmless for liability concerning my personal health and well-being arising out of Legacy Church's negligence, and liability for my personal property that might be lost, damaged, or stolen while on a mission trip arising out of Legacy Church's negligence.

I also give permission for my child to travel with an assigned staff member from Legacy Church outside the United States of America, and give that person permission to administer medical care in the case of an emergency.

I have carefully read the foregoing and I understand that my signature herein holds Legacy Church, its officers, employees, or other agents harmless for liability for injury, damage, loss, accident, delay, or irregularity in schedule arising out of the church's negligence or the negligence of its officers, employees, or other agents.

\_\_\_\_\_  
Legal Guardian if under 18 (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Participant's Name (Please Print)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date