



*reaching people in difficult-to-reach places*

## **TEAM MEMBER APPLICATION PACKET**

Thank you for your interest in serving with Answering the Call. Please complete this application in its entirety and email to [info@answeringthecall.org](mailto:info@answeringthecall.org) with your last name, trip region, and travel month in the subject line. This address may also be contacted with any questions and/or concerns you may have.

Trip Application.....	2
Financial Policies.....	5
Consent Form.....	6
Medical Information Form.....	7
Release and Waiver of Liability.....	9



## Trip Application

### Applicant Information

Full Legal Name (as it appears in your passport)

\_\_\_\_\_

(Last)

(First)

(Middle)

Street Address: \_\_\_\_\_

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone:(\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Marital Status (please circle):    *Single*    *Engaged*    *Married*    *Widowed*    *Separated*    *Divorced*

Passport Number/Issue Date: \_\_\_\_\_

Place of Issue (City/State): \_\_\_\_\_

Passport Expiration Date: \_\_\_\_\_

### Relationship with your Local Church

Name and address of the church you most regularly attend: \_\_\_\_\_  
\_\_\_\_\_

Name of Pastor: \_\_\_\_\_

### References

*Please list three references to your character. If involved in your local church, we request that one be a member or leader in the church.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Length of Relationship (months & years): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Length of Relationship (months & years): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Length of Relationship (months & years): \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

**Statements of Belief**

At ATC we believe:

- God so loved the world that He sent His son Jesus, not to judge the world, but that the world would be saved through Him (John 3:16-17).
- Jesus is the Way, the Truth and the life (John 14:6), and true and complete salvation for man is found in Him alone (Acts 4:12).
- If we confess our sin and repent, Jesus is faithful and righteous to forgive us our sins and cleanse us from all unrighteousness (1 John 1:9), giving us new life in Him (2 Corinthians 5:17) and empowering us with the filling of His Holy Spirit (Acts 2:38).
- All scripture is inspired by God and is profitable to us for teaching, reproof, correction and training in righteousness (2 Timothy 3:16).
- Those who put their faith in Christ Jesus are one body in Him (Galatians 3:26, 28).
- In the unity of believers. It is our prayer that unity be perfected among the entire body of Christ such as Jesus spoke of in John 17:23, in order that the world may know He was sent by God and that God loved the world even as He loved His son, Jesus.

**Experience and Education**

Please detail any cross-cultural and short-term experiences you have had, including any involvement you have had with ATC.

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Please list any relevant education you have had and/or fluency in foreign language(s).

## Personal Background

Please share your faith journey.

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If you have had previous cross-cultural experiences, in the U.S. or internationally, how has it impacted you?

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Why do you desire to participate in this specific trip?

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What personal strength(s) and/or gifting(s) do you bring to this team?



## FINANCIAL POLICIES

### Payment Schedule

In order to secure travel arrangements, we abide by the following payment plan for trip members:

50% of the balance due 60 days before departure.

80% from each trip member due 30 days before departure.

100% of the balance due 10 days before departure.

*Note: Any extra support raised will not be refunded to trip members, as this is required by tax law for nonprofits. However, these funds will be used in the fields to which we are traveling.*

<b>Trip Location</b>	<b>Estimated Cost</b>
South Asia	\$3,200
Darfur	\$3,800
Sudan	\$3,800
Costa Rica (April)	\$825 + airfare
Costa Rica (July - August)	\$1,675 + airfare
Middle East	\$3,200

If you need fundraising assistance, please contact [info@answeringthecall.org](mailto:info@answeringthecall.org) for support, guidance and/or resources.

## CONSENT

In submitting this application:

- I agree to respect the beliefs of ATC, my field coordinator's leadership, and my fellow trip members.
- I will adhere to culturally appropriate behaviors and attire.
- I am willing to comply with ATC's standards and direction concerning the posting of pictures, video, and/or other media.
  - If accepted, you will receive more specific guidelines for the region to which you will travel.
- I agree to not disclose my location beyond the description ATC provides me.
- I agree to not disclose the names of ATC's local contact person(s).
- I have read and agree to the above payment schedule.
- I have read and agree to the following disclaimers:
  - Answering the Call will not be responsible for extra, unforeseen trip expenses. Should these occur, the traveler will be responsible. Please plan accordingly.
    - *Note: You may use our travel agent to purchase travelers' insurance.*
  - If I decide to cancel my participation on a team after airline tickets have been purchased, I agree to reimburse Answering the Call for that cancellation expense.

Signature: \_\_\_\_\_

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



**MEDICAL INFORMATION**

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

**Insurance Information**

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

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

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Emergency Contact Information**

*Please provide contact information for two individuals not on this trip who may be contacted in the event of an emergency.*

**Primary Contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Alternate Contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

**Current Medical Condition**

Please answer the following questions to the best of your ability.	YES	NO
Are you currently ill or undergoing any medical treatment (including medications)? Explain:		
Do you have any back or knee problems? Explain:		
Do you have any daily mandatory medical needs (including medications)? Explain:		
Do you live with any physical or mental disabilities? If so, please explain:		
Do you have any health issues not already mentioned which might hinder you during this trip? Explain:		

Do you have any allergies (ie. foods, medications, hay fever, etc.)? Explain:		
Do you have any special dietary needs/requirements? Explain:		
Is your tetanus shot current? Date of last tetanus shot:		
What is your blood type?		





## **RELEASE AND WAIVER OF LIABILITY**

The undersigned, \_\_\_\_\_ (Your Name, "Missioner") desires to participate in a mission trip ("Mission Trip") organized, sponsored and/or funded by Answering The Call ("ATC") and engage in the activities related to the Mission Trip ("Activities"), which may include but not be limited to: traveling; consuming food available or provided; construction-related activities; nutrition-related activities; medical-related activities; educational-related activities; organizing and conducting gatherings, meetings or services; working on local projects; other humanitarian and healthcare related activities; and recreational activities.

In consideration of the acceptance and approval by ATC of my participation in any Mission Trip, and for other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Missioner executes this Release and Waiver of Liability (the "Release") in favor of ATC, its officers, representatives, members, agents, employees, staff and volunteers (collectively "Releasees"). Missioner freely, voluntarily and without duress executes this Release under the following terms:

1. **RELEASE AND WAIVER.** Missioner releases and forever discharges and holds harmless Releasees and their successors and assigns from any and all liability, claims and demands of whatever kind or nature, either in law or in equity, including but not limited to Releasees' own negligence, which arise or may hereafter arise from my Activities during the Mission Trip. Missioner understands and acknowledges that this Release discharges Releasees from any liability or claim that Missioner may have against Releasees with respect to any bodily injury, personal injury, mental injury, illness, death or property damage that may result from any and all of my Activities on a Mission Trip, whether caused by Releasees or their officers, directors, employees, agents or otherwise. Missioner also understands and acknowledges that Releasees do not assume any responsibility for or any obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage. Missioner hereby releases and forever discharges Releasees from any claim which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with my activities during a Mission Trip.

2. **INDEMNIFICATION.** Missioner agrees to indemnify and hold harmless Releasees from and against any losses, costs, damages and expenses resulting from any claims for bodily injury or property damage arising out of any Mission Trip Activities.
  
3. **MEDICAL TREATMENT RELEASE/AUTHORIZATION TO HEALTH CARE DECISIONS.** Missioner hereby releases and forever discharges Releasees from any claim or action whatsoever, including but not limited to Releasees' own negligence, which arises or may hereafter arise on account of any first aid, treatment or service rendered in connection with Activities during the Mission Trip, and acknowledges and agrees that participation in a Mission Trip subjects Missioner to the possibility of physical illness, injury (minimal, serious, catastrophic and/ or death), and loss; that there is no assurance of access to medical care or adequate medical facilities; and that Missioner acknowledges that Missioner is assuming the risk of such illness or injury by participating in a Mission Trip. In the event of such illness or injury, Missioner authorizes ATC or its representatives to obtain necessary medical treatment for me (including but not limited to hospitalization, injections, medication, anesthesia, and surgery) by any physician, dentist or other health care provider selected by an authorized representative of ATC and hereby releases and holds harmless Releasees in the exercise of this authority, and such release shall include but not be limited to Releasees' own negligence. Missioner further acknowledges and understands that Missioner will be responsible for any and all medical and related bills (including but not limited to all costs and expenses related to medical evacuation and/or repatriation) that may be incurred on Missioner's behalf for any illness, injury, or loss, including death, sustained during the Mission Trip and while traveling to and from the site for the Mission Trip, whether or not the Mission Trip actually occurs. Missioner further acknowledges that any persons designated by ATC may act as the attorney-in-fact for me for purposes of the HIPAA privacy rule for the purpose of making any health care decisions and for obtaining access to protected health information necessary in relation to any Mission Trip.
  
4. **ASSUMPTION OF THE RISK.** Missioner understands and acknowledges that the Activities may include hazardous situations and that the Activities and travel inherent in the Mission Trip may involve danger, injury, loss, risk of violent crime, and lack of access to medical care and adequate medical facilities. Missioner is aware that the Department of State has advised that U.S. citizens, non-governmental organization workers and missionaries may be subject to serious risk and dangers, including but not limited to the risk of violent crime which could result in injury or death. Missioner further understand and acknowledges that there is inherent risk in consuming local foods and living in local accommodations in the city(ies) or country(ies) involved with participation in the Mission Trip. Missioner further understands and acknowledges that Missioner may be traveling to and from locations where there is a risk of terrorism, war, insurrection, criminal activities, inclement weather or other

circumstances that could threaten the health or safety of the participants. Missioner also understand and acknowledges that Releasees are under no obligation to pay ransom or make any other payments to secure the release of hostages. Missioner hereby expressly and specifically assumes the risk of injury, harm and/or loss in the Activities and releases Releasees from all liability, including but not limited to Releasees' own negligence, for any loss, cost, expense, injury, illness, death or property damage resulting directly or indirectly from the Activities.

5. **INSURANCE.** Missioner understands and acknowledges that ATC is under no obligation to provide, carry, or maintain health, medical, travel, disability, or other insurance coverage for any participant. Each participant is expected and encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage, including coverage for medical evacuation and/or repatriation. Missioner also is aware that his/her current insurance (including disability insurance) may not be accepted overseas and that he/she has investigated this possibility and has made the decision to participate in a Mission Trip such issues notwithstanding.
6. **SPOUSAL JOINDER.** If Missioner is married, in consideration of the acceptance and approval of ATC of Missioner's participation in any Mission Trip organized, sponsored, and/or funded by ATC, the undersigned spouse of Missioner joins in this Release for the purpose of acknowledging all that is contained herein and agreeing to the releases hereby given, which shall be binding on the undersigned spouse just as fully as they are binding on Missioner.
7. **OTHER.** Missioner expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the United States of America, and that this Release shall be governed by and interpreted in accordance with the laws of the USA. Missioner further acknowledges and agrees that in the event any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining clauses or provisions of this Release, which shall continue to be enforceable. Further, a waiver of any right under this Release does not prevent the exercise of any other right.

ENTERED AND AGREED on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Missioner Signature

Spouse's Signature

\_\_\_\_\_

\_\_\_\_\_

Print Name: \_\_\_\_\_

Print name: \_\_\_\_\_