

Everyday Exports Application for YOUTH

Please send to: Vineyard Church C/O Dean Hines • 1201 Riverside Ave • Ft. Collins, Co 80524 • (970)484-5999

Date _____ Location of mission trip applying for _____ Date of trip _____

Mr. Miss Sex: Male Female

This must be your legal name as printed on your Passport/Birth Certificate

Name _____
Last First Middle

Address _____

City _____ State _____ Zip _____

Home # _____ Work # _____ Cell # _____

Fax _____ Email _____

Passport # _____ or, I will apply for a passport on: _____

Birth date ____/____/____ Age _____

Birthplace: City _____ State/province or country _____

Are you a citizen of the U.S.? Yes No
If no, country of citizenship: _____

Are you a resident alien? Yes No If yes, please include a copy of U.S. government authorization

SPIRITUAL/CHURCH/MISSIONS:

When did you accept Jesus Christ as your personal Savior? ____/____

Do you attend church regularly? Yes No Are you a member of a church? Yes No

What volunteer work or ministry are you currently involved with, or have done (please list dates) here at Vineyard?

What other type of volunteer work or ministry you have done? _____

Home Church/ denomination _____

Pastor's name _____ Phone (____) _____

Address of church _____
Street City/State Zip

What steps are you taking or have you taken to grow spiritually and to prepare yourself for the mission field?

Have you served on any previous mission trips? Yes No
If yes, briefly describe location, date and organization leading trip (use separate sheet).
Have you ever been involved in the occult? Yes No If yes, please explain _____

On a separate piece of paper, briefly describe how you became a Christian.

FAMILY:

Do your parents or guardian agree with you going on a mission trip? Yes No

Name of your father or guardian (if applicable) _____

Address _____

Street City/State Zip
Phone (____) _____ Occupation _____
Name of your mother or guardian (if applicable) _____
Address _____
Street City/State Zip
Phone (____) _____ Occupation _____

EDUCATION & PREPARATION:

What is the highest level of education/grade completed? _____

| What is your current occupation? (if applicable)

Are you currently attending school? Yes No Where? _____

When do you expect to graduate? _____

TRAINING:

What other educational experiences have you had (such as special training, music lessons, travel, etc.)?

Please list any mission courses you have taken: _____

Please list mission-related books and periodicals you have read: _____

What non-English languages have you studied and for how long? _____

In which non-English languages are you able to converse? _____

EMPLOYMENT EXPERIENCE:

Present employer (If applicable)

Duties performed _____

HISTORY:

Please answer the following questions as accurately as possible. A yes or no to any of these questions will not automatically cause someone to be disqualified on the trip. However, we will discuss these topics with you.

In the last year, have you used, or, are you currently using illegal drugs? Yes No

If yes, date of last use: _____

If yes, please explain: _____

Are you currently living a life style consistent with Biblical principals? (Not involved in: sexual activities or other inappropriate activities.) Yes No

Have there been any exceptions in the last year? Yes No

Do you currently smoke? Yes No Do you drink alcoholic beverages? Yes No

Have you ever been arrested? Yes No If yes, when? _____ If yes, attach brief explanation

Were you convicted? Yes No If yes, attach brief explanation.

HEALTH:

Condition of health: _____ Height _____ Weight _____

Traveling in another country may have variable health resources and require greater physical stamina. Considering this, do you have any health needs, conditions or physical limitations? Yes No If yes, please explain:

Is there any reason you would not be able to engage in rigorous outdoor activity, primitive living, high altitudes, extreme temperatures, etc.? Yes No If yes, please explain: _____

Have you ever sought counseling (depression or other)? Yes No.
If yes, please describe _____

Have you ever received treatment for drug or alcohol dependency? Yes No

Are you under a doctor's care at the present time? Yes No If yes, briefly describe.

Has your education/employment been disrupted for any period of time because of a physical problem or nervous disorder? Yes No

OTHER QUESTIONS:

Please list the name of a Leader or Pastor who can serve as a reference: _____
Their phone # (____) _____ e-mail _____

Please list the name of a friend, roommate, or co-worker who can serve as a reference: _____
Their phone # (____) _____ e-mail _____

Have you sensed God's leading to go on this trip? Yes No How? _____

Why are you interested in this trip? _____

What do you think some of your gifts and talents are? (1 Cor 12, Rom 12, Eph 4) _____

What do you envision your role in the team to be? _____

JUST FOR FUN!

If you could be any animal what would it be and why?

If language were not an obstacle, where would you love to live for a year?

What is your favorite bumper sticker and why?

What is the most useless thing you own? _____

What is one of your favorite words? _____

Application Process

Application and deposit fee must be received by: _____

The deposit is nonrefundable upon acceptance as a trip participant. This is not an extra charge, but is credited toward the trip. If applicant is not accepted for the trip, the deposit will be refunded.

Send application and deposit check, payable to The Vineyard, ATTN: Everyday Exports

Please thoughtfully and prayerfully consider the following:

I agree that if I am accepted as a member of the Vineyard's 2008 'Everyday Exports' team serving in _____:

1. I am willing to develop and maintain a **servant's attitude**.
2. I will be a **team** member. We will be a team and not a group of individuals.
3. I will be **flexible, patient and cooperative**. Schedules and plans may change during the trip.
4. I will **respect** the team leaders and their decisions. I will refrain from complaining and whining, and be creative and supportive.
5. I will be a **learner** and not a teacher.
6. I will attend all **pre-trip planning and learning meetings and post-trip functions**.
7. I agree to pay the total trip cost including the deposit whether through personal funding, raising support or both. (I understand that I must personally contribute a minimum of 10% of total trip cost, even if I raise more than the total trip cost from outside contributions). This does not include the costs of my passport, cost of any necessary shots, and spending money.
8. If for any reason I should decide to not go on the trip, after the airline ticket is bought, I understand and agree that I will be responsible to pay for the airline ticket and any expenses incurred on my behalf that cannot be recovered.

I agree to the above and the information in this application is accurate!

Applicant's Signature

Parent/ Guardian Signature if under 18

Date

updated 1/30/08