

## **GO! Ministries Short Term Mission Trip (STMT)**

Guatemala Information Flyer 7 days/6 nights \$750 per person

Trip Dates: Tue June 27 – Mon July 3, 2023

Flights must arrive no later than 1:30 pm or you will need to book a hotel,  
at your expense, due to rush hour traffic)

### Financial Info:

Non-refundable \$250 deposit by 23 March 2023

Non-refundable \$250 deposit by 23 April 2023

Non-refundable \$250 payment by 23 June 2023

### Application for GO! Ministries STMT

NOTE: Please return electronic application with a recent digital photo

#### **Section 1. Personal Information:**

Name: \_\_\_\_\_ Gender: \_\_\_ M \_\_\_ F

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Do you have a Passport? (If No, have you applied?) \_\_\_ Yes \_\_\_ No

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

Expiration Date (Must have at least 6 months left before exp): \_\_\_/\_\_\_/\_\_\_

#### **Section 2. Emergency Contact:**

In case of Emergency, whom should we contact? \_\_\_\_\_

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

Emergency Contact Home #: \_\_\_\_\_ Work # \_\_\_\_\_

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

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

#### **Section 3. Health Information:**

Describe your present health: (Excellent, Great, Good, Fair, Poor): \_\_\_\_\_

Please explain any major illness you have had in the last five years: \_\_\_\_\_

Are you currently under the care of a Physician? (If "No", skip to Section 4)

If yes, please explain: \_\_\_\_\_

Name of Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Field of Medical Service: \_\_\_\_\_

**Section 4. Church Membership**

Are you a member of a Church? \_\_\_ Yes \_\_\_ No. If yes, for how long? \_\_\_\_\_

Name of Church: \_\_\_\_\_

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

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

Pastors Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

May we call your Pastor for a reference? \_\_\_ Yes \_\_\_ No. If No, please explain why not: \_\_\_\_\_

Have you been in the Church? If so, please share what Ministry or Small Group you've been involved with: \_\_\_\_\_

**Section 5. Personal Testimony**

(If you need more room, add additional paper as needed)

Please share your testimony of how you came to personal faith in Jesus Christ.

Please include how long you have been a believer: \_\_\_\_\_

What you hope to see the Lord do in and through you on this STMT: \_\_\_\_\_

Why do you want to participate on this STMT: \_\_\_\_\_

## Section 6. Personal References

Please provide two references. One should be a ministry leader with whom you have served. The other reference should be someone who knows your ministry abilities as well as your strengths and weaknesses.

### Reference 1

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship/How long have you known this person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

### Reference 2

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship/How long have you known this person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

## Section 7. STMT Behavior Policy

If selected to be a part of this STMT, I make a commitment to (type "Yes" after each line:

- 1) Conduct myself in a manner worthy of the Lord on this trip: \_\_\_\_\_
- 2) Submit to the authority of the team leader and the field host: \_\_\_\_\_
- 3) Submit to the team behavior policy "I will refrain from any behavior that might compromise my witness" (e.g. abusive language, drugs, etc) : \_\_\_\_\_
- 4) Additionally, if my behavior constitutes a problem, the team leader has the authority to send me to return home, at my expense: \_\_\_\_\_

## Section H. STMT Health Insurance

I understand and agree that I will e-mail a copy of my STMT Health Insurance Policy 2 weeks prior to my departure. Brotherhood Mutual Insurance. [www.brotherhoodmutual.com](http://www.brotherhoodmutual.com) is highly recommended

Electronic Signature/Date (I affirm my name posted here represents my signature)

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