

SAFEWATERNEXUS Mission Trip Application

Applicants under 18 years of age must also fill out the permission for a minor to travel form to complete this application.

General Information

Name: **As it appears on your passport or as it will appear on your passport**

First _____ Middle _____ Last _____

Social Security # _____ Birth Date ____ / ____ / ____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone: _____

Your E-mail Address _____

Passport Number: _____ Expiration Date: _____

Preferred Name: _____ T Shirt Size: _____

Trip Applying for (Country and Dates): _____

Have you traveled on a short term mission trip with us in the last year? ____ Yes ____ No

If Yes – List Date (s) _____

Name of church you attend: _____

Senior Pastor's Name: _____

Senior Pastor's E-Mail Address: _____

Church Website: _____

Medical Information:

Please attach a separate sheet listing any special medical conditions you have or special medications you are taking that we should be aware of:

IF None Check Here: _____

Emergency Contact Information:

Name: _____

Relationship: _____

Emergency Contact #: _____ Cell Phone #: _____

E-Mail Address _____

Your Story

We want to know more about you and the gifts and talents that God has given you. Please answer the following questions.

1. What previous overseas experience do you have? Please list location, dates, & focus.

2. Are you fluent/conversational in another language(s) other than English?

3. What are your talents or skills sets? For instance, construction skills, translating, musical, etc

4. In 2-3 paragraphs, please describe your personal relationship with Jesus Christ. *(We would encourage you to honestly write about how your life was before Christ, what happened when you came into a personal relationship with Christ, and how he has changed your life since then. Use the back of this page if you need more room.)*

Participant's Agreement

I, the undersigned participant, acknowledge and agree to the following:

- I will abide by the direction and instructions of my team leader
- I will be willing to take a servants role
- I will abide by the local customs
- I will participate in all team meetings, activities, and services with my team
- I will refrain from the use of tobacco and illegal drugs
- I will refrain from possessing a negative attitude or using abusive, prejudice or offensive language
- I will accept full financial responsibility for any injury or illness that I may sustain during this trip
- I acknowledge that I am receiving no financial compensation of any type for participating on this trip
- I understand that all expenses associated with my participation in this trip are my responsibility
- I understand that all costs for this trip are to be submitted in accordance with the required schedule of payment due dates for this trip
- I give my permission to SAFEWATERNEXUS to use any oral or written comments made by, and any photographs or videos taken of, the participant for promotional purposes
- I understand that certain expenses such as the cost of my airline tickets are not refundable. If I should cancel my participation in the trip after this purchase has been made, I will not be reimbursed and no moneys that have been receipted as tax exempt can be returned to me by the organization.
- I give SAFEWATERNEXUS authorization to purchase travel insurance on my behalf for this trip

Applicants Signature

Date

Please Send the Following Items With Your Application and Liability Waiver and Release Form

-A COPY OF YOUR PASSPORT INFORMATION PAGE (Picture and Signature Page)

**SEND APPLICATION AND ABOVE ITEMS TO
SAFEWATERNEXUS
PO Box 393
Bristol, TN 37621**

Liability Waiver and Release

In consideration of being accepted to voluntarily participate on a mission trip with SAFEWATERNEXUS, I hereby release SAFEWATERNEXUS, its partners and/or agents, their staff, directors, officers, and assigns from all claims and liabilities of any kind, which may arise from or may be connected in any way with my participation on this trip.

I understand that conditions in some of the places to which I may travel are not of the same standard as the conditions to which I am accustomed. I realize that there may be certain health risks as well as other risks to personnel and property as I enter into participation in this trip.

In the event of an emergency, I hereby authorize the team leader of this trip, appointed by SAFEWATERNEXUS or their appointed leader, as an agent for me to consent to: Any x-ray examination; to hospitalize, anesthetize, or perform surgery as needed; consent to medical, dental, or surgical diagnosis; treatments; hospital care advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the law of the state or country where services are rendered, either at a doctor's office or in a hospital. I expect that my family will be contacted by telephone or e-mail as soon as possible after any illness or injury.

I certify that I am of legal age and competent to sign this release and that I hereby do so voluntarily. I hereby certify that I have read the participants agreement, that I agree to abide by the terms outlined in the participant's agreement and that the information furnished on the trip application is true and correct.

I understand that this document constitutes a full and complete waiver of all possible claims for any act or omission, including claims for negligence regarding injury or property damages, arising out of my participation on this trip.

I understand that this Release applies to, covers, and includes unknown, unforeseen, unanticipated, and unsuspected damages, loses, or liabilities, and the consequences thereof, which result from the matters hereinbefore inferred to as well as those now disclosed and known to exist. The provisions of any state, federal, local, territorial law or state providing in substance that releases shall not extend to claims or damages which are unknown or unsuspected to exist at the time hereby expressly waived by me.

I hereby certify with my signature that I have read the Liability and Waiver Release, and agree to all statements herein contained.

Signature of Applicant

Date