

Global Encouragers Ministries, Inc.

Volunteer In Missions Participation Form

Thank You

Thank you for your interest in being a mission volunteer with **Global Encouragers Ministries, Inc.** We are a non-profit mission organization committed to encouraging, enlisting, and mobilizing Southern Baptists and other Great Commission Christians and churches. Our objective is to share the Gospel message of love, hope and salvation for all mankind by providing opportunities for volunteers and churches to use their multi-ministry gifts and resources to meet the physical and spiritual needs of others around the world.

Team Member

Full Name:

Dates of Planned Project:

Airport of Departure:

Airport of Return:

Country:

Team Leader:

Personal Information

Make two photocopies of your passport's front ID page. Include one with this form and keep one with you at all times.

Enter full legal name as it appears on your passport.

First Name:

Middle Name:

Last Name:

Preferred Name:

Date of Birth: (mm/dd/yyyy)

Gender: Male Female

Marital Status: Single Married

If Married, Name Of Spouse:

Social Security Number:

Current Mailing Address

Street 1:

Street 2:

City: State: Zip:

Country:

Phone

Home Phone:

Work Phone:

Mobile Phone:

Email

Email 1: Home Work

Email 2: Home Work

Languages/Proficiency

Please indicate languages other than English in which you are proficient and the level of proficiency.

Language 1 Proficiency

Language 2 Proficiency

Language 3 Proficiency

Language 4 Proficiency

Talents/Abilities

Here's your time to shine.

Ability 1 Ability 2

Ability 3 Ability 4

Comments

Emergency Contact Information

The emergency contact information indicated below will be used by Global Encouragers Ministries, Inc., it's representative, your team leader, or, other indicated person during our trip, in contacting someone on your behalf should it become necessary during the volunteer mission project.

First Name

Last Name

Daytime Phone

Evening Phone

Mobile Phone

Medical Information

PLEASE make us at Global Encouragers Ministries, Inc. aware of any important medical information concerning your current state of health and any allergies to drugs, insects, foods, materials, etc... that could endanger your health and possibly your life while participating on this volunteer mission project. Should you need more space, please feel free to use a blank piece of paper to complete the information and include it together with your completed form. **PLEASE** provide us with a list of current medical conditions for which you are being treated, and any specific medications that you take on a daily or regular basis. We would like to ask that each team member have in their possession a list of their current medications and noted allergies in your possession at **ALL** times during the trip. This information will be kept private and only used should it become necessary for you to receive medical attention or treatment on the field. Each team member is covered by an insurance that will take care of any medical emergencies and even the evacuation of any team member that becomes seriously ill should it become necessary from the overseas. This is included in the cost of your trip.

Name and Address of my Primary Care Provider(s) or Specialist(s):

Phone Number(s) for Contact in the USA of Medical Providers:

Current Medical conditions for which I take Medicine on a regular basis:

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My current medications that I take daily or regularly:

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Specific “Allergies” to medications, insects, foods, materials, etc.:

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Other information you might think important for us to know about you:

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Church Information

Church Membership: Southern Baptist Other

SBC Association Name:

Name of Church:

Address:

City: State: Zip:

Membership in years:

Pastor's Name:

Church Phone:

By giving us your pastor or other church leader's e-mail address, you enable us to secure your church's recommendation.

Church or Pastor's Email Address:

As a team we understand that Global Encouragers Ministries, Inc. assumes no responsibility for loss of property, damage to same, personal harm or illness, that may occur; and we, for ourselves, our heirs, executors, administrators, distributes, and assigns, in consideration of our admission to volunteer service and other good and valuable considerations, do hereby absolve said Global Encouragers Ministries, Inc. and hold it harmless from any claim or demand which any team member or legal representative might conceivably assert upon the basis on the foregoing.

As a team member, I affirm that I am currently a member of or participate in the activities of a Great Commission Church on a regular basis, whether Southern Baptist or of another evangelical denomination.

As a team member, I affirm that I am sound in my faith and am spiritually, emotionally, and physically equipped to serve on this volunteer team.

The team understands that we will be under the policies of Global Encouragers Ministries, Inc. and the indicated team leader. All team members agree to abstain from the use of tobacco products, alcoholic beverages, illegal drugs and any other behavior that would hinder Christian ministry. The team understands that a breach of this contract could be cause for dismissal of any team member and his/her return home would be at that team member's own expense.

Please type your name here as a statement that you have read and agree to the statements above.

Signature:

Date Signed:

Initials:

A completed form must be signed and dated by each team member planning to participate on the volunteer mission project and returned to either your team leader or sent directly to Global Encouragers Ministries, Inc. 2-4 weeks before the date for the trip. The forms can be sent either by email, fax, or regular mail. Each participant is encouraged to make a printed copy of your completed form for your own personal record before forwarding it your team leader or to:

Global Encouragers Ministries, Inc.

P.O Box 281945

Metro Center

Nashville, TN 37228

Phone/Fax: (615) 480-6034 or (865) 405-2510

Email: globalencouragersministries@pobox.com