

**God is on the Move**

**TEAM MEMBER APPLICATION – MINOR**

**April 17 – 24, 2020**

PLEASE PRINT

Applicant's Legal Name (as it appears on your passport) \_\_\_\_\_  
First Middle Last

Birth Date: \_\_\_/\_\_\_/\_\_\_

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

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

Phone: Day (\_\_\_\_\_) \_\_\_\_\_ Phone: Cell (\_\_\_\_\_) \_\_\_\_\_

Parent's Name \_\_\_\_\_

**Emergency Contact Information**

Emergency Contact Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact Cell Phone (\_\_\_\_\_) \_\_\_\_\_

**Personal Identification Questions** (to assist our emergency response team in the unlikely event it is needed)

1. Mother's Maiden Name \_\_\_\_\_
2. Favorite sport \_\_\_\_\_
3. Favorite color \_\_\_\_\_

**Spiritual Information**

Born-again Christian? Yes \_\_\_\_\_ No \_\_\_\_\_ Home Church \_\_\_\_\_

Pastor/ youth pastor name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Will your actions reflect that you are a guest in a foreign country, you are not here to change the Mexican culture, but rather to respect the people, show them Christ's love and be an example to them of Christ?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Do you agree to abide by the instructions given to you by your team leader(s), and to respect each team member, doing your utmost to be a team player and not cause friction with others?  
Yes \_\_\_\_\_ No \_\_\_\_\_

**Medical Information**

This information will NOT be used to determine eligibility. It is important for your safety while you are on the trip.

My overall physical condition is: (circle one)    Poor            Average            Good            Excellent

If you circled anything other than excellent, please explain \_\_\_\_\_

\_\_\_\_\_

List any heart-related restrictions you have \_\_\_\_\_

List any physical restrictions you have (such as lifting heavy things) \_\_\_\_\_

List any allergies you have or have had in the past \_\_\_\_\_

List any other ongoing medical conditions you have (e.g. asthma, etc.) \_\_\_\_\_

List any medication you are on and what it is for:

Medicine \_\_\_\_\_ Dosage \_\_\_\_\_ For \_\_\_\_\_

Medicine \_\_\_\_\_ Dosage \_\_\_\_\_ For \_\_\_\_\_

List any other medical factors that could impact you in a medical emergency, such as rare blood type, hemophilia, etc. \_\_\_\_\_

List any contagious diseases you presently have or have recently been exposed to which could affect others \_\_\_\_\_

My doctor is \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

My last tetanus inoculation was: \_\_\_\_\_

My health insurance coverage is with \_\_\_\_\_

My insurance identification number is \_\_\_\_\_

Is your medical insurance valid outside the United States? Yes \_\_\_\_\_ No \_\_\_\_\_. If NO, please contact one of the following web sites for short term mission trip insurance options. Short term mission trip insurance is not required but strongly recommended. *Open Bible God is on the Move* and *Open Bible Churches* accepts no responsibility for medical costs incurred during your trip. Insurance web sites to contact: [www.missionaryhealth.net](http://www.missionaryhealth.net); [www.STMServices.com](http://www.STMServices.com); [www.globaltravelinsurance.com](http://www.globaltravelinsurance.com); [www.gomissiontrip.com](http://www.gomissiontrip.com).

**Please bring the original or a copy of your insurance card with you on your trip.**

## **PHOTO RELEASE**

I hereby give to Open Bible Standard Churches, its successors in interest and assigns, the unrestricted right and permission to copyright and use, re-use, publish and republish photographic portraits or pictures of me in which I may be included intact or in part, composite or distorted in character or form, without restriction as to changes or transformations in conjunction with my own or a fictitious name, or reproduction hereof in color or otherwise, made through any and all media now or hereafter known for illustration, art, promotion, advertising, trade or any other purpose whatsoever.

I also permit the use of any public display of material in connection therewith, either in printed or digital form. I hereby relinquish any right I may have to examine or approve the completed product or products or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it is applied. I hereby release, discharge and hold harmless Open Bible Churches, its successor or assigns, its legal representatives and all persons functioning under its permission or authority, or those for whom they are functioning, from any liability by virtue of any blurring, distortion, alteration, optical illusion or use in composite form whether intentional or otherwise, that may occur or be produced in the taking of said picture or in any subsequent processing thereof, as well as any publication thereof, including without limitation any claims for libel or invasion of privacy.

Because I am under the age of majority and do not have the right to contract in my own name, my parent (s) and/or legal guardian (s) have signed this authorization, release and agreement on my behalf. They have read the contents thereof prior to its execution and fully understand the contents thereof. This agreement shall be binding on me, my heirs, legal representatives and assigns.

## **STATEMENT OF INTENT**

The undersigned participant and parent/guardian do hereby consent to participate in or have our son/daughter or ward participate in the noted activity organized by God is on the Move, a ministry of Open Bible Standard Churches, a religious, non-profit corporation. We have been informed that a foreign country is very different from the United States. We have been apprised that there are risks politically, militarily, culturally, safety wise, and health wise and that problems in any or all of these areas may arise during this mission trip. In addition, we have been apprised that the threat of terrorism against Americans increases on foreign soil. We are also aware of the threat of terrorism in air travel both from American and foreign airports. We also understand that this trip will involve mission activities, sporting activities and interacting directly with the people while on this trip. Having been so informed we give our permission for our son/daughter or ward to participate in the above named mission trip and we agree to assume all expenses occasioned by any injury or loss.

The undersigned participant agrees to abide by and the undersigned parent or guardian agrees that the participant is bound by the rules and regulations, supervision and discipline set and applied by Open Bible Standard Churches and God is on the Move and its agents and the undersigned parent/guardian does hereby authorize God is on the Move or its staff members or other agents to arrange for and consent to X-ray examinations, anesthetic, dental, medical or surgical diagnosis, and treatment for his or her son/daughter or ward. The undersigned parent/guardian will furnish payment or insurance for any such treatments, at his/her own expense.

We have read the above and completed the medical information; we understand its content and import and agree to its provisions. We hereby declare this permission form is executed without reliance upon any statement or representation of Open Bible Standard Churches or God is on the Move or any agent, employee or volunteer thereof and the execution is made voluntarily and knowingly.

**IMPORTANT ADVISORY:** Individuals traveling to a foreign country and reentering the U.S. are advised that having in their possession illegal substances (drugs) or illegal merchandise are subject to severe penalties including fines and imprisonment as prescribed by each country. Violation of such laws overseas often results in automatic and length prison terms.

**Parent/Guardian signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Signature of trip participant** \_\_\_\_\_ **Date** \_\_\_\_\_

**STATE OF** \_\_\_\_\_

**COUNTY OF** \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_, before me, the undersigned, a Notary Public in and for said County, in said State, personally appeared \_\_\_\_\_ to me known to be the identical person(s) named in and who executed the foregoing instrument, and acknowledged that **he/she/they** executed the same as **his/her/their** voluntary act and deed.

\_\_\_\_\_  
Notary Public

*A facsimile or photocopy of this form shall be valid as the original.*  
Please give your completed form to your team leader, who will send the original of this document to Open Bible God is on the Move, AND keep a copy with your team at all times.

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