



## MISSION TRIP APPLICATION

Dear Missionary,

We are excited that you are interested in joining us out in Uganda! It is our prayer that you will hear God's calling for you to "GO" into the world and take the Gospel. In the book of Isaiah, the Lord said to Isaiah, *"Whom shall I send? And who will go for us?" And Isaiah responded, "Here I am. Send me!" We pray that you will be able to respond like Isaiah, "Here I am. Send me!"*

Participating in a mission trip will have a profound impact on your life, whether this is your first or one of many that you have done in the past. God will grow you and transform you in a special way through your mission experience.

The attached paperwork is an essential part of the trip process. Please read the contents of this packet and be prepared to return the paperwork according to your specific team deadlines.

Thank you for your interest in joining us on mission for Jesus! We pray that God will bless you as you are obedient to His call.

~ Lily

*"But you will receive power when the Holy Spirit comes on you; and you will be my witnesses in Jerusalem, and in all Judea and Samaria, and to the ends of the earth." Acts 1:8*

# HOW DO I GET STARTED?

## **1. PRAY**

The Holy Spirit will lead you in this process. He may reveal only one step at a time, but God will be faithful to lead you.

## **2. FILL OUT THE MISSION TRIP APPLICATION**

We want you to succeed and the trip to be effective. Your application will provide key information that will allow us to get to know you and better understand the dynamics of the trip.

## **3. GET YOUR PASSPORT**

Start on the process now. Even if you are unsure of your travel dates it is crucial to have this process started.

## **4. GET INFORMATION**

Communicate and send all questions or concerns to Lily so that you are fully prepared to travel to Uganda. Lily would love to guide you and give you the details of dates, costs, and the trip projects. You will also find them in the Uganda Mission Guide.

## **5. INTERVIEW**

Lily will communicate to you in an interview like manner once you've submitted your application and heard your testimony. Any concerns that you or the Team Leader may have will be addressed at this time. Lily reserves the right to either accept or deny your participation based on whether you are determined to be a good fit for the particular team for which you applied or within the Ministry projects available at the time. Unfortunately, some health conditions cannot be accommodated on trips. All decisions will be made with prayer and wise counsel.

## **6. ATTEND TEAM MEETINGS**

Make it a priority to attend each of your teams meetings. Communicating with each other, praying and fasting together and encouraging one another before your travels to Uganda is essential. It brings about unity, belonging and makes you stronger as you get ready to embark on this journey.

## **7. GO COME BACK SHARE**

Your stories and enthusiasm will be the instrument God uses to encourage another to GO! Send a follow-up report to all those whom you asked for prayer and financial support.

# INSTRUCTIONS FOR COMPLETING THE MISSION TRIP APPLICATION

- BBB Ministries of Uganda uses this application for all mission trips. Once it is completed, it is maintained on file. If this is your first trip, the entire application will need to be completed. If you have already completed an application, please speak with Lily to determine what forms require completion. **Please communicate changes in your information such as a name change, passport renewal, address change, etc.**
- Please fill out each page completely and neatly.
- Do not omit any pages from the information packet.
- Be sure to include a copy of your health insurance card, complete the medical information section, and sign the release to be treated.
- If you already have an application on file, please provide updated medical information if there have been any changes.
- Please provide a copy of the photo page of your passport that are clear and legible. This is to keep a copy on file for identification should problems arise in Uganda or if you lose your passport. **The picture must, therefore, be clear enough to identify you.**
- Make sure your passport is signed and that the expiration date is more than **six (6) months** subsequent to the trip dates.
- Provide copies of any travel visas that are required for your trip. If you're applying for the Visa upon entrance into Uganda, no need to give copy.
- Due to it being an international trip, always put a copy of the photo page of your passport in every piece of luggage that you take.
- Make sure the liability forms are signed and emailed back to Lily in a timely manner.

### PERSONAL INFORMATION

Name as it appears on Passport: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Gender: Male ( ) Female ( )

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

Email: \_\_\_\_\_ Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Missions Experience:

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How would you describe your present health? Excellent ( ) Good ( ) Average ( ) Poor ( )

Are you currently under the care of a physician for a medical condition? Yes ( ) No ( )

If yes, describe the condition:

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### MISSION TRIP INFORMATION

Dates of Trip: \_\_\_\_\_ Team Leader: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### PARTICIPANT ACKNOWLEDGEMENT

By signing below, you understand the information, guidelines, rules, and financial responsibilities required by BBB Ministries of Uganda. You understand that you are responsible for purchasing your own airline tickets in your full legal names and all cancellation fees are your own responsibility. The training meetings that your Team Leader sets for this mission project are critical for the spiritual unity and physical preparation of the entire team. You commit to faithfully attend all those meetings at the scheduled times.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# INVOLVEMENT QUESTIONNAIRE

Church Membership: \_\_\_\_\_ (PASTORAL REFERENCE MANDATORY)

How long have you been a member? \_\_\_\_\_

List the ministries in which you have been involved at your church, including time of involvement and any leadership positions held:

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List the ministries in which you have been involved outside of your church, including time of involvement and any leadership positions held:

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How would you describe your daily relationship with Jesus Christ?

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What are your spiritual gifts?

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Have you had training in personal evangelism?

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Please explain:

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Have you been on a short-term mission trip before? \_\_\_\_\_

Describe your experience:

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# PERSONAL TESTIMONY

What was your life like before coming to Jesus?

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What got you interested in God?

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How and when did you come to know Jesus as your Savior?

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How is your life now that you know Him?

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Briefly describe how you see God calling you to participate on this trip.

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What are your talents and how do you see them being used on this trip?

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## LIABILITY ACKNOWLEDGEMENT

I, \_\_\_\_\_, in consideration of my acceptance as a Team Member in a short-term mission trip to Uganda (BBB Ministries of Uganda Organization):

1. I am aware of the potential hazards and risks to my person and property associated with serving in a mission capacity, such hazards and risks including, but not being limited to, injury or death by accident or intent, disease, war, terrorist acts, weather conditions, inadequate medical services and supplies, and criminal activity and acts. I choose to go on this trip with full awareness of these risks. I accept these risks, recognizing that BBB Ministries of Uganda would not be able to offer the opportunity for missions service without a release such as this.

With respect to BBB Ministries of Uganda and its agents, officers, volunteers, directors, and employees, I voluntarily assume all risks of death, injury, illness or loss associated with such risks, and any damage to my personal property, and I release BBB Ministries of Uganda and its agents, officers, directors, and employees from any liability that I may suffer or claims I may have as a result of participation in the missions project even if resulting from the negligence of BBB Ministries of Uganda, its agents, officers, volunteers, directors, and employees. I further recognize that such risks have always been associated with missionary service. (2 Corinthians 11:23-28)

2. I attest and certify that I have no medical conditions that would prevent me from performing my duties.

3. I give permission to be photographed, and/or recorded, with video and/or sound, for promoting BBB Ministries of Uganda and its activities, and/or for creating an audio or video product of the trip for sale.

4. I understand that travel insurance is not provided for the trip in which I am participating, and it is my responsibility to get it if I want.

5. I expressly agree that this Liability Acknowledgement is intended to be as broad and as inclusive as permitted by law. I further state that I have carefully read the foregoing and understand its contents, and I voluntarily sign this Liability Acknowledgement as my own free act. I also understand that this is a legal document and I have the right to consult with an attorney before signing it.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of \_\_\_\_\_, County of \_\_\_\_\_

# MEDICAL RELEASE

Your Name: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

## Medical Insurance Information

Company: \_\_\_\_\_ Policy Type: \_\_\_\_\_  
Phone: \_\_\_\_\_ Policy No.: \_\_\_\_\_

## Medical Information

List all prescription medication(s) you will bring on the project: \_\_\_\_\_  
For what condition(s)? \_\_\_\_\_  
Date of last tetanus shot (this must be within ten years): \_\_\_\_\_  
Date (and Vaccine Card) of Yellow Fever Vaccine (REQUIRED): \_\_\_\_\_  
COVID Certificates (both RAPID & PCR – REQUIRED): \_\_\_\_\_  
Date of Hepatitis A inoculation (this is not required, but recommended): \_\_\_\_\_  
List any physical disabilities or limitations: \_\_\_\_\_  
List any known allergies or reactions: \_\_\_\_\_  
List any major illnesses in the past year: \_\_\_\_\_  
Have you fainted or passed out? \_\_\_\_\_ When? \_\_\_\_\_ Why? \_\_\_\_\_  
Do you have eating disorders? \_\_\_\_\_ If yes, have you received counseling? \_\_\_\_\_

## For Completion by Physician

*If you are under the care of a physician for any condition or medication, have him/her complete the following:*

I have examined \_\_\_\_\_ and find him/her to be in good health and physically able to take part in the mission project to Uganda on (dates) \_\_\_\_\_.  
Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Release

In an emergency, illness, injury, or accident which requires medical attention, I give my permission to BBB Ministries of Uganda, its representatives and all attending health care professionals (defined as including, but not limited to, registered nurses, licensed practicing nurses, physician's assistants, doctors, and paramedics) to provide me with the medical treatment, including but not limited to, hospitalize, anesthetize, or surgery.

I \_\_\_\_\_, the undersigned, do release, acquit, discharge and covenant to hold harmless BBB Ministries of Uganda and its representatives from all actions, damages, or liabilities arising out of the treatment of any illness, injury, or accident during my participation in the trip. It is the intention of this release that BBB Ministries of Uganda and its representatives incur no liability whatsoever while attempting to meet all medical needs that I may require during the short-term missions trip.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
State of \_\_\_\_\_, County of \_\_\_\_\_



# SHORT-TERM MISSION PROJECT POLICIES

## Financial Policy for Team Members:

- Team Members are expected to raise 100% of the financial support for the trip. Funding will be completed by the due date set by the Team Leader. No tickets will be purchased by BBB Ministries, it is fully the responsibility of each team member in cooperation with the team leader.
- Support shall be raised by the Team Member following the guidelines presented in writing by the Team Leader.
- If the Team Member raises more than the required support or for any reason cannot participate in the trip, BBB Ministries will reallocate the funds within general funds supporting the projects within the ministry.
- Team Members may submit financial support to BBB Ministries of Uganda with their name and trip information. An end of year financial receipt will be provided for each Team Member. **Due to IRS restrictions, refunds are not provided.**

## Policies for Team Member Behavior and Attitude:

- Team Members are reminded that they are ambassadors of Jesus Christ (2 Corinthians 5:20). As Team Members travel overseas, they not only represent Christ but also BBB Ministries of Uganda, the United States and the mission agency or church you are coming with. This is a tremendous responsibility. For this reason, BBB Ministries of Uganda asks that each Team Member seek to be above reproach in his/her actions and attitudes.
- Team Members must submit to the Team Leader's authority.
- Due to the political instability and anti-American sentiment in Uganda, BBB Ministries asks that Team Members refrain from expressing political opinions while overseas.
- All Team Members must abstain from the consumption of alcoholic beverages or any use of tobacco or illegal drugs.
- Each Team Member must adhere to the behavioral guidelines for the team set by the Team Leader and /or BBB Ministries of Uganda, with a mind toward the culture of Uganda. This will require a servant attitude toward all nationals and other Team Members, as well as the willingness to learn from the Ugandan culture (1Corinthians9:19- 23a)
- The Team Leader reserves the right to ask a Team Member to return home if that Team Member's behavior is disruptive/destructive to the team, the ministry, or the host community. Any additional cost incurred as a result of this action will be at the Team Member's expense.

I have read and understand the policies outlined above, and I agree to abide by these policies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# RAISING SUPPORT FOR SHORT-TERM MISSIONS

## **Building a Support Team**

Each Team Member will be responsible for developing his or her own support team. The support team consist of:

- Prayer Supporters
- Encouragers
- Financial Contributors

The concept is to develop a team, not just to raise funds. The most important need for the Team Member is for people to pray for him or her, before and during the trip.

## **The Team**

The idea of the team is to involve as many people in the mission experience as possible.

The team:

- Is a means by which others can share in the blessings of the mission (Philippians4:17)
- Is a Biblical approach (2 Corinthians 8:4)
- Is a means by which others become World Christians through giving and praying

You should seek people that you want on your team, not those who you think will give money. Remember, if the prayer support is in place, everything else will fall into place.

## **Raising Support**

If a Team Member cannot pay for the trip, the most effective proven method to raise individual support is to write a letter for distribution to friends, co-workers and church members you have a personal relationship with. Potential contributors are happy to have the opportunity to invest in someone they know personally or an endeavor they care about. God's Word promises us that He will supply our every need for the task He has called us to.

## **Prepare the Team List**

Usually between 50-100 names is a good goal, with not all being Church members (50% outside your church). Your team list should include friends, relatives, Christian contacts, and non-Christian contacts for whom God may open a door for an opportunity to share your faith through this process.

## **Write the Letter**

You are asking people to support the ministry of BBB Ministries of Uganda. If you are asking for financial support, you are asking your team to help with the cost that you will incur by participating in the ministry (transportation, meals while in the field, in-country housing, visa, travel insurance, etc.) A common testimony of Team Members is

that while they were initially put off by the idea of sending support letters, the experience turned out to be a highlight of the entire trip.

## BACKGROUND INVESTIGATIVE AUTHORIZATION

I understand that BBB Ministries of Uganda reserves the right to conduct background investigations concerning applicants, employees, and volunteers. I further understand such background investigations may be updated periodically if I am employed by BBB Ministries of Uganda. I understand background investigations on me may include gathering information through driver's license searches, national criminal history checks, and/or national sexual predator checks, or through contacting my personal references. These investigations may include information relating to my criminal history, general reputation and personal characteristics, as permitted by law. I understand that I may request the name and address of the reporting agency furnishing such a report obtained through this background investigation; however, I also understand that BBB Ministries of Uganda is not responsible by law nor is it obligated in any way to provide me with a copy of any report or to disclose to me the content of any report it receives from any reporting agency obtained through this background investigation. If I desire a copy of any such report, it is my responsibility to obtain a copy at my expense from the reporting agency. I do hereby expressly release BBB Ministries of Uganda and its employees and any person, association, firm, or corporation furnishing BBB Ministries of Uganda with any information concerning me or my affairs from any claims, cause of action or damages that may have or purport to have arisen by reason of having disclosed or furnished any information concerning me or my affairs, the provision of any law to the contrary being hereby expressly waived.

Acknowledged and agreed to this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Race

\_\_\_\_\_  
Printed Full Name

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Home Address

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City/State/Zip

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Driver's License Number and State