



## APPLICATION FOR SHORT TERM TEAMS

Name of Team: \_\_\_\_\_

Trip Date Departure: \_\_\_\_\_ Return Date: \_\_\_\_\_

### Personal Information:

Name: \_\_\_\_\_

Street: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sex M  F  Marital Status: Married  Single

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

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

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

Spouse's Name (if applicable): \_\_\_\_\_

In case of emergency, please notify: \_\_\_\_\_

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

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

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



Name of Medical Insurance Company: \_\_\_\_\_

Individual or Family Coverage Group #: \_\_\_\_\_

Insurance Phone Number: \_\_\_\_\_ Policy Holder Name: \_\_\_\_\_

Allergies: \_\_\_\_\_ Drug allergies: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Any current medical condition(s) that need to be noted: \_\_\_\_\_

**References (please include 2):**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_  
(i.e. pastor, manager, leader...)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_  
(i.e. pastor, manager, leader...)

Please indicate any special skills, talents, or service experience that you feel may be helpful on this trip.

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Please list previous travel experience:

Country	Missions Name	Dates	Task Performed

Why do you want to go on this trip?

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PROJECT: \_\_\_\_\_

DATE OF TRIP: \_\_\_\_\_

\*This Release is for adults only. Minors must have parent or guardians fill out a separate form.

## RELEASE

I agree to release, discharge, and hold harmless, Desert Springs Church (DSC), together with any affiliated or subsidiary entities, their employees, agents, and members from any and all claims or demands due to personal injury, illness, or death as well as any and all property damage sustained of any nature which may be incurred by me, whether in foreign or domestic territory, while participating in the above described event or activity. I also agree to be directed by and responsible to the designated leadership for this short-term project. Further, I agree to hold harmless and to indemnify DSC as a result of my participation. I understand that I am voluntarily engaging in all activities, including extra-curricular recreational activities and that I engage in such activities at my own risk. This release shall be binding on myself, as well as my heirs, beneficiaries, executors, administrators, successors, assigns and next of kin.

I understand that it is my obligation to purchase and/or provide insurance coverage for myself and any individual traveling with me that would cover an emergency airlift out of the country, if necessary. I understand that DSC, though they will assist as much as possible in the event of such an emergency, accepts no liability with regard to this situation. It is further understood that DSC does not provide emergency services including air and other transportation, food, etc., and that DSC in no way assumes responsibility for any harm or injury which may come to me as a result of the acts or negligence of any person hired by DSC to provide services to me.

- I acknowledge I have read the "Code of Conduct" and agree to comply with said "Code of Conduct".
- I acknowledge I have reviewed the US Department of State travel warnings for travel to the country of destination. [www.travel.state.gov](http://www.travel.state.gov)

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

Name: \_\_\_\_\_

Current Date: \_\_\_\_\_