

# Team Member Application

## Berean Way



Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Sex: M F Date of Birth: \_\_\_\_\_

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

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

Insurance Provider: \_\_\_\_\_

Medical Conditions, Medications: \_\_\_\_\_

Passport #: \_\_\_\_\_ Expiry: \_\_\_\_\_

What church do you attend? \_\_\_\_\_

List your ministry involvement? \_\_\_\_\_

Which of the following areas would you be interested in providing service or leadership?

Team Prayer/Devotions \_\_\_\_\_ Team Leadership \_\_\_\_\_

Team Projects on Trip \_\_\_\_\_ Pre-trip/Post-trip Social \_\_\_\_\_

Do you plan on raising financial support for this trip? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you committed to pre-trip and post-trip meetings? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any teaching skills? If yes, please explain. Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any musical skills? If yes, please explain. Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any medical skills? If yes, please explain. Yes \_\_\_\_\_ No \_\_\_\_\_

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On a separate sheet of paper, please address the following:

1. Describe yourself (please provide your testimony and relationship with Jesus, your profession, your skills, and any international/missions experience)

2. Why do you desire to be a member of this trip?

3. What areas of growth do you anticipate throughout this entire process?

4. What challenges do you expect?

5. Please provide a written recommendation from both your pastor and a personal mentor.

*Please return this application to the Berean Way, PO Box 4311, Tualatin, Oregon 97062-4311*