

Short-term Mission Trip Application Packet



Application Process

Important! To process your application, we must have the following returned to LTI offices:

1. A completed application
2. The name, address, phone number, and e-mail address of the pastor to whom you gave your Pastor's Reference Form
3. Signed financial agreement
4. Signed consent to medical treatment and release of claims form
5. Completed Medical Assessment Form
6. Your non-refundable deposit

Laborers Together

It is essential that we, the body of Christ, touch the nations with His love, as stated in the Great Commission (Matthew 28:18-20). Only as we learn to reach out to the world around us, in obedience to Jesus, are we truly disciples of Christ. Our short-term mission experiences are designed to help people not only fulfill the Great Commission but also allow them to do the work of the ministry (Ephesians 4:12). These mission trips provide people with:

- ◆ A chance to minister in a foreign country
- ◆ Help in using your new skills and keeping your zeal as you return home

A challenge has never been conquered by sitting still; it requires action. During our years of leading short-term mission trips, we have seen many lives radically changed as they allow God to use them to minister the gospel. These trips change the team members and those to whom they minister. We are thrilled that you are considering a mission trip.

We know you will come away saying, as others have, "Now I know that God speaks to me and uses me!"

Other Requirements

- ◆ Spend at least one hour per week for 6 weeks prior to our trip, for our trip
- ◆ **Apply for a passport immediately** if you don't already have one

Special Needs

Laborers Together will work hard to assist you if you have any special needs. To receive appropriate assistance you must be sure to inform our office in writing as soon as possible. All travelers must insure that they are medically and physically fit for travel and that such traveling will not endanger themselves or others.

Insurance

Laborers Together does not carry insurance on people going on our short-term mission trips. Therefore, we recommend that you carry your own personal and travel insurance.

Financial Policies Tax Deduction

Laborers Together International, Inc. is a non-profit organization. LTI is registered with the IRS as a 501(c)(3) organization, making donations to this ministry tax-deductible. The IRS requires control of funds to be released to Laborers Together for donors to receive a tax deduction. All contributions must be made payable to Laborers Together International or LTI. Funds must be sent to us in U.S. Dollars. We also accept Master Card and Visa cards.

Refund Policy

You may receive a refund on any of our short-term mission trips. All cancellations must be in writing and received at LTI's offices. No refunds will be made in the event of "no shows" or cancellations by the traveler after the start of the trip(s). There will also be no "travel vouchers" issued. Listed below is the refund schedule, which excludes the non-refundable deposit.

90 days before trip	75% refunded
60 days before trip	25% refunded
30 days before trip	10% refunded
Less than 30 days	No refund

In the event that the short-term mission trip is cancelled due to political unrest or other circumstances LTI will either refund your money (excluding the non-refundable deposit and expenses described below) or transfer your funds to another trip with similar pricing.

Additionally, if for any reason you decide not to go on this trip, or the trip is cancelled, any money for expenses that had to be prepaid and are nonrecoverable will not be refunded, such as but not limited to transportation and hotels.

Pastor's Reference

Applicant's Name _____

Pastor's Name _____ Phone (____) _____

Pastor's Address _____ E-mail _____

We consider your reference to be a very important part of our evaluation of an applicant for a Laborers Together International mission trip. We rely upon your opinion of the applicant's character and ability to function as a missions team member. For the best decision in regard to this applicant and for LTI teams, we need thorough information from those who know them. All information on this form will remain confidential. For that purpose, **please mail your completed form *directly* to:**

**Laborers Together International
PO Box 123075
Fort Worth, TX 76121-3075**

817-367-2025

lti@ltin.org

1. How long have you known this applicant?
2. How well do you know him/her?
3. Rank the applicant **High**, **Medium** or **Low** in each of these areas:
 - Adaptable Leader Servant
 - Responsible Teachable Honest
 - Punctual Encourager Helpful
 - Takes instruction well from leadership
 - Takes instructions well from peers in authority
 - Can focus on a task
4. Are they: (Yes or No)
 - Moody Domineering Argumentative
 - Rebellious

5. How active is the applicant in his/her church?
6. Do you know of any instability in the applicant? Explain.
7. Has the applicant, in the last ten years, been involved with:
 Tobacco Excessive alcohol Illegal drugs
 Cult Occult Illicit sex
 Been suspended from school or fired from a job
8. (Please mark one.) Would you say the applicant has:
 A strong influence on his/her peers
 Little influence
 Negative influence
9. Would you consider this person to be physically, emotionally, and spiritually prepared for an intense time of giving of himself/herself in ministry to others in the midst of cultural differences?
 Yes No Don't know
10. If you were the team leader of a missions group would you:
 Very much want this applicant as a member of your team
 Be willing to take this applicant as a team member
 Take the applicant as a team member knowing there would be areas to be aware of
 Be hesitant to take this applicant as a team member

Please feel free to make any further comments or suggestions (add another page if necessary).

A negative response does not necessarily mean rejection of the applicant. We appreciate your timely and honest reply. **Please send directly to LTI.**

Signature _____ Date _____

Laborers Together International Financial Agreement

1. I have been given the cost of this short-term mission trip and understand that I will be given a payment schedule to follow. My signature denotes my agreement to pay this amount by the deadlines given. I understand that I am subject to losing my position on this team if I do not meet the deadlines.
2. I understand that I will receive a cover letter in the event that I choose to raise money by sending out missionary letters. I will send the LTI cover letter with my personal support letter. This cover letter is from Laborers Together International, and I will not change any part of it.
3. Please have checks written to Laborers Together International or LTI. (If you choose to work through your church, discuss this with your pastor and have him decide how your donors should write their checks. Your church can then write checks to Laborers Together International. The church will then be responsible to send tax-deductible receipts to the individual donors.) Laborers Together International will receive money, up to the full amount, at any time, providing the money is received by the deadlines given in the payment schedule. For any deviation from this schedule you must contact the LTI office and make approved changes prior to the scheduled deadline.

4. Deadlines are according to when expenses occur for each trip. Therefore, if I find it necessary to withdraw my commitment to this trip I will receive a refund based on the refund policy.
5. Any money given to Laborers Together International that is in excess of the trip fee will go toward other expenditures for this trip. For example, LTI desires to leave gifts of money with the missionary hosts.
6. Any solicitation of donations for personal spending money must be separate from Laborers Together International. No checks made payable to Laborers Together International may be used for personal spending money. Laborers Together International's name, logo, or other materials are not available for this purpose. In soliciting for personal spending money, please make it clear that these funds are not being used for the expenses of this tour and are not tax deductible.
7. The cost of LTI mission trips does not include passport fees, medical costs or any other personal expenses that the short-term missionary may incur.

I have read, fully understand, and agree to this financial agreement. A breach of this contract will result in serious consequences and possible dismissal from this or any other Laborers Together International trip.

Applicant's Signature _____ Date _____

Parent Signature _____ Date _____

(if under 18)

Laborers Together International

Mission Trip Application

Name _____ Phone (____) _____

Address _____

City _____ State _____ Zip Code _____

Fax (____) _____ E-mail _____

Male Female Birthdate _____
(month/day/year)

Citizenship: U.S. Other What Country? _____

Social Security Number _____

Parents'/Spouse's Name _____

Your trip choices:

First _____

Second _____

Third _____

Home Church _____

Church Address _____

Phone (____) _____ E-mail _____

Pastor _____

—Marital status: married divorced single

—Are you currently in a dating relationship? yes no

—Have you been involved with any of the following in the past ten years:

alcohol illegal drugs cult occult illicit sex

Please explain:

A negative response to any of the above questions will not mean automatic rejection of your application. We are interested in your heart. Please be honest and explain any negative answer.

Please enclose a paragraph telling about your salvation experience and your relationship with the Lord.

To process your application, we must have all the items listed under application process in this application packet. Please check and double check that you have enclosed everything we need.

Conditions I agree to: Laborers Together International (LTI) is dedicated to the ministry of the Lord Jesus Christ and His church. LTI trips are ministry trips, not vacations. We require all participants to be in good physical, mental, and spiritual condition.

Trip prices are based on 2002 costs and are subject to change. Dates, travel arrangements, and schedules are subject to change if the need arises, whether it be political, natural or mission related. All applications and contributions to this ministry are nontransferable. All donations received by LTI go toward exempt project expense. To receive a tax deduction, IRS stipulates that the donor must release control of the money donated to the non-profit organization. All payments are to be made in US dollars unless other arrangements are made with LTI.

In the even of political unrest or natural disaster, LTI will decide whether or not to cancel the trip. If we would decide to cancel a trip, for any reason, team members will receive a refund. See refund policy.

Team members, leaders, and staff serve at their own risk, and LTI is not liable in the event of sickness, accident, death, or terrorist acts, or for transportation or any other expense beyond that of the normal trip costs. I also give Laborers Together International the right to use my picture, voice, and/or testimony in any type of promotional or advertising materials.

My signature (and signature of my parent or legal guardian, if I am under the age of 18) indicates my agreement with all conditions listed above.

Signed _____ Date _____

Parent Signature _____ Date _____
(if under 18)

LTI, PO Box 123075, Fort Worth, TX 76121-3075

Consent to Medical Treatment, Release of Claims and Hold Harmless, and Durable Power of Attorney Form

For those who travel with Laborers Together International Short-term mission trip(s)

I, _____, hereby affirm and agree that I am of legal age and am legally competent to sign this agreement and release; that I have fully informed myself of the details and risks of the short-term mission trip that I am attending with Laborers Together International prior to signing this release.

In the event that I am injured during a short-term mission trip with Laborers Together International and am unable to provide consent to medical treatment, I authorize Laborers Together International or one of its designees to consent on my behalf to the performance of any and all medical treatment judged necessary by Laborers Together International, until I am able to provide consent or until someone legally able to speak on my behalf is made available. I agree, individually and on behalf of my heirs, to release, indemnify, and hold Laborers Together International harmless from any liability which may be assessed against Laborers Together International as a direct or indirect result of said medical treatment. I agree to pay or arrange for payment for all costs associated with said medical treatment.

By signing this form I am agreeing to give Laborers Together International or its designee durable power of attorney, to speak on my behalf, for the dates listed below, which are the dates of my short-term mission trip.

Name of short-term mission trip _____

Dates of short-term mission trip _____

Signature _____ Date _____

Signature of Parent or legal guardian _____ Date _____
(if under 18 years of age)

Witness _____ Date _____

Laborers Together International Medical Assessment Form

Name _____ Male Female

FAMILY HISTORY

Relationship _____ Age(s) _____ Health status or cause of death _____

Mother _____

Father _____

Brother(s) _____

Sister(s) _____

Spouse _____

Children _____

Is there a history of: Diabetes Heart Disease
 Cancer High Blood Pressure
 Other (specify) _____

Explain above history:

PERSONAL HISTORY

When did you last see a doctor? What reason?

Blood Type _____

Are you currently under a doctor's care? Yes No

If yes, explain:

Physician's name and address:

Please list prescribed medications you are taking:

Please list over-the-counter medications you are taking including vitamins or other pills which you buy without a prescription:

Please list physical challenges:

Are you involved in any regular exercise program? Yes No

If yes, how many times each week and for how long?

Please check what applies to you (past or present) on the following chart:

	Yes	No
1 Head injury or concussion		
2 A "stroke"		
3 Epilepsy (seizures, convulsions), fainting spells, blackouts		
4 Treatment for emotional or nervous problems		
5 Frequent trouble sleeping		
6 Attempted suicide		
7 Frequent or severe headaches, migraine		
8 Meningitis		
9 Glasses or contacts		
10 Eye problems, glaucoma, cataracts, etc.		
11 Hearing loss, frequent ear infections, ringing in ears		
12 Mouth or throat problems, tonsillitis		
13 Nose problems, hay fever		
14 Thyroid problems		
15 Chest pain, chronic cough, coughing up blood		
16 Difficulty breathing, shortness of breath		
17 Tightness in chest		
18 Asthma, emphysema, pneumonia		
19 Tuberculosis (TB) collapsed lung		
20 Heart problems, night sweats		
21 Breast problems, lump in breast		

22	Chronic recurring infections, boils, cold sores, herpes		
23	Skin problems or rashes		
24	Chronic indigestion, diarrhea, food intolerance		
25	Abdominal pain		
26	Hiatal hernia, gallbladder trouble		
27	Ulcer, stomach problems		
28	Liver problems, hepatitis, cirrhosis		
29	Diabetes		
30	Sickle cell disease or trait		
31	Malaria, other tropical diseases		
32	Enlarged lymph gland		
33	Cancer		
34	Cysts or tumors		
35	Kidney or bladder problem		
36	Rectal bleeding, fissure, abscess, hemorrhoids		
37	Colitis or chronic constipation		
38	High blood pressure		
39	Venereal disease		
40	Alcoholism		
41	Hernia or hernia repair		
42	Weight problems		
43	Anemia or blood disorder		
44	Back, neck, or spine problems, disc disease		
45	Need to wear back brace or support		
46	Joint problems, arthritis, bursitis		
47	Joint injuries, knee, shoulder, etc.		
48	Ankle or leg swelling, cramps, varicose veins		
49	Foot problems		
50	Childhood diseases (measles, mumps, chicken pox, rubella)		
51	History of drug abuse		
52	Other		
53	Allergies (include food, dust, drugs, soaps, pollens, detergents, chemicals) Please list on next page.		

We Believe. . .

1. . .the Bible is the inspired Word of God. It alone is the final authority in determining doctrinal truth.
2. . .we are saved by grace (which is undeserved and unearned) through faith in Jesus Christ.
3. . .in baptism by the Holy Spirit, with the evidence of speaking in tongues, as was initiated at Pentecost.
4. . .Heaven is the eternal dwelling place of all who believe in Jesus Christ. Heaven is a literal place. Hell is also a real place, and all who reject Jesus will live there for eternity.
5. . .there is one God, who is a Trinity, manifested in three distinct persons: the Father, the Son and the Holy Spirit.



Laborers Together International, Inc.
PO Box 123075
Fort Worth, TX 76121-3075