

# Mission Middelburg Application June/July 2025

1. Name \_\_\_\_\_  
Last First (legal) Preferred Name Middle

2. Permanent Address \_\_\_\_\_  
Street, Box or R.R. City State Zip

3. Telephone: Cell \_\_\_\_\_ Business \_\_\_\_\_ Home \_\_\_\_\_

E-mail \_\_\_\_\_

4. Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Citizen of \_\_\_\_\_ Birth Place \_\_\_\_\_

5. Gender \_\_\_\_\_ Marital Status:  Single  Married  Widowed  Separated  Divorced

6. Occupation \_\_\_\_\_  
Title Description

7. Please describe your relationship with Jesus. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Have you had previous experience on the mission field or traveled in a foreign country? If yes, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Our behaviors, words and actions are part of our witness to Christ. We strive to conduct ourselves in a manner worthy of the Gospel. Christians in some cultures are offended by believers who use tobacco or excessive alcohol. There may be some provisions for responsible alcohol consumption during the trip. It is our policy that all members of the mission team will abstain from tobacco and drugs while on the trip, and use appropriate language.

(Check one.)  Yes, I agree to the above statement.  I have concerns about this I'd like to discuss!

11. What foreign language abilities do you have? \_\_\_\_\_

12. List medical or first aid training. \_\_\_\_\_

13. Team participants are expected to attend team-building planning meetings. These are schedule for:

Sunday, November 10, 11:30 – 1:30 p.m.

Sunday, February 9, 11:30 – 1:30 p.m.

Sunday, May 4, 11:30-1:30 p.m.

Will you strive to be present at each meeting to contribute to your team? \_\_\_\_\_

(over)

# Mission Middelburg Application June/July 2025

13. What talents or gifts do you have that you feel the Lord can use? What specific things are you good at doing? \_\_\_\_\_

---

---

14. **You will need a Passport.** Do you have one? \_\_\_\_\_ Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

If you already have a passport, send a copy of the front page of your passport (photo and passport number).

IF YOU DO NOT HAVE A PASSPORT, apply for one IMMEDIATELY. Please send a copy of you passport as soon as you receive it.

16. Are you prepared to rough it on the mission field? \_\_\_\_\_ Can you walk several miles? \_\_\_\_\_ Carry your own luggage? \_\_\_\_\_

Explain \_\_\_\_\_

**Please return this form to Our Savior Lutheran Church by October 1<sup>st</sup>.**

**A \$100 deposit (checks made payable to Our Savior Lutheran Church) is also due October 1<sup>st</sup>.**

---

*Signature*

---

*Date*

---

*Parent or Guardian Signature (if under 18)*

---

*Date*

*Checklist:*

\_\_\_ *This application, completed in its entirety*

\_\_\_ *Copy of Passport (if you have one)*

\_\_\_ *\$100 deposit check made out to Our Savior Lutheran*