

# Gear Up Ministry-Application

- Gear Up Mission Trip Application Form
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- Passport Information and Acceptance Facilities
- Gear Up Release and Assumption of Risk Form

## SHORT-TERM MISSIONS APPLICATION

[gearupministry@yahoo.org](mailto:gearupministry@yahoo.org)

## PERSONAL DATA

Print: Full Legal Name

\_\_\_\_\_  
First Middle Last

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Home Phone \_\_\_\_\_ Cell # \_\_\_\_\_ E-mail Address:  
\_\_\_\_\_

Shirt size: (please circle) Small Medium Large Extra Large 2X 3X 4X

Passport Number: \_\_\_\_\_

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

Place and date of issue: \_\_\_\_\_

Expiration Date \_\_\_\_\_

List previous citizenships, if any \_\_\_\_\_

Place of Birth: \_\_\_\_\_

**Important:** You need to have a passport that is valid for at least 6 months AFTER the completion of the trip. If you do not yet have a passport, you need to apply for one as soon as possible.

## SERVICE INTEREST

Which mission trip(s) are you interested in participating with?

Please share why you feel motivated to go on this particular trip.

List your skills, gifts and abilities and overall personality traits that you feel could be an asset on a ministry trip such as this one.

List previous overseas experience (country, length of stay and purpose of trip):

## **CHRISTIAN EXPERIENCE**

Please describe how you came to know Jesus Christ as your Savior:

What are your regular habits of Bible study and prayer?

How have you grown spiritually in the last year? Please be specific.

How regularly do you attend church/church-related activities?

Are you involved in other ministries outside Gear Up? Please list and give a brief description of your involvement.

## **FIELD MINISTRY**

Are you an ordained pastor or a lay preacher? YES / NO

Would you be willing and able to give a devotional or speak? YES / NO

Do you sing or play guitar? YES / NO

Would you be willing to do special Christian music during our times of ministry? YES / NO

Do you speak or understand any foreign language(s)? YES / NO

What is your level of proficiency? Good / Fair / "Cloudy"

## Health History

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

Date of Birth (dd/mm/yy): \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Blood  
type: \_\_\_\_\_ Date: \_\_\_\_\_

Yes No

- \_\_\_ \_\_\_ 1. Rheumatic fever
- \_\_\_ \_\_\_ 2. Heart trouble, Heart attack, Angina
- \_\_\_ \_\_\_ 3. High blood pressure
- \_\_\_ \_\_\_ 4. Chest pain
- \_\_\_ \_\_\_ 5. High Cholesterol
- \_\_\_ \_\_\_ 6. Lung or breathing problems
- \_\_\_ \_\_\_ 7. Asthma
- \_\_\_ \_\_\_ 8. Hives or Eczema
- \_\_\_ \_\_\_ 9. Allergies (foods, animals, medicine, pollen)
- \_\_\_ \_\_\_ 10. Antidepressant
- \_\_\_ \_\_\_ 11. Seizures
- \_\_\_ \_\_\_ 12. Liver disease
- \_\_\_ \_\_\_ 13. Thyroid problems
- \_\_\_ \_\_\_ 14. Arthritis or Autoimmune disorder
- \_\_\_ \_\_\_ 15. Joint replacement
- \_\_\_ \_\_\_ 16. Ulcers
- \_\_\_ \_\_\_ 17. Kidney problems
- \_\_\_ \_\_\_ 18. Kidney or other organ transplant
- \_\_\_ \_\_\_ 19. Tuberculosis (TB)
- \_\_\_ \_\_\_ 20. Anxiety or Depression
- \_\_\_ \_\_\_ 21. Chronic Fatigue
- \_\_\_ \_\_\_ 22. Are you pregnant/ think you might be pregnant?

Yes No

- \_\_\_ \_\_\_ 1. Anticoagulants (blood thinners)
- \_\_\_ \_\_\_ 2. High blood pressure meds
- \_\_\_ \_\_\_ 3. Cortisone (Steroids)
- \_\_\_ \_\_\_ 4. Anticonvulsants (Seizure meds)
- \_\_\_ \_\_\_ 5. Insulin or other drug control
- \_\_\_ \_\_\_ 6. Thyroid Hormone
- \_\_\_ \_\_\_ 7. Nitroglycerin
- \_\_\_ \_\_\_ 8. Digitalis or other drugs
- \_\_\_ \_\_\_ 9. Hormone supplements
- \_\_\_ \_\_\_ 10. Fainting spells
- \_\_\_ \_\_\_ 11. Sedatives or Antipsychotics
- \_\_\_ \_\_\_ 12. Any other regular medication

### **In the past 2 years have you?**

- \_\_\_ \_\_\_ 13. Been admitted to a hospital
- \_\_\_ \_\_\_ 14. Been in an accident
- \_\_\_ \_\_\_ 15. Been under medical care for
- \_\_\_ \_\_\_ 16. Been in psychiatric care
- \_\_\_ \_\_\_ 17. Seen a counselor regularly
- \_\_\_ \_\_\_ 18. Adopted a child

\_\_\_ \_\_\_ Do you have any other diseases; conditions or problem you think we should know about?

\_\_\_ \_\_\_ Do you have any health problems or physical limitations that might hinder your work in a different climate, high altitude or adverse living conditions? Please explain.

If you answered yes to any of the above questions, please give a brief explanation below.

**EMERGENCY CONTACT**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Numbers: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**MISSIONS STATEMENT OF HEALTH**

I, \_\_\_\_\_ affirm \_\_\_\_\_ is a  
(Physicians Name) (Patient's Name)  
patient of this practice. \_\_\_\_\_ is  
(Patient's Name)  
medically, physically and mentally able to travel and participate in activities of the  
\_\_\_\_\_ Short Term  
(Name of Mission Trip)

Mission Trip scheduled \_\_\_\_\_.  
(Dates of Mission Trip)  
\_\_\_\_\_

Physician' Signature \_\_\_\_\_

**Mission Medical Update**

Short Term Mission Country: \_\_\_\_\_  
Dates: Departure: \_\_\_\_\_  
Return: \_\_\_\_\_  
Name: \_\_\_\_\_  
DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Ht.: \_\_\_\_\_ Wt.: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_  
ER Phone #: \_\_\_\_\_  
Physicians Name: \_\_\_\_\_  
Phy. Phone #: \_\_\_\_\_

Pharmacy: \_\_\_\_\_ Phar. Phone #: \_\_\_\_\_ Blood  
type: \_\_\_\_\_

Allergies: Medicine: \_\_\_\_\_

Food: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*Are you being treated for a Chronic Illness/Injury? (Please Circle) Yes:\_\_\_\_\_ No:. \_\_\_\_\_ If yes,  
a Physician Statement to travel and participate on a Short Term Mission Trip is Required and  
should include diagnoses and treatment. (Attach Physician's signed statement) Date received:  
\_\_\_\_\_ LIST ALL MEDICATIONS TAKEN: (dosage and time of administration on this page)

## SAMPLE SUPPORT LETTER

It is natural to have some feelings of discomfort in asking others to help support you in going on a mission's trip. But keep in mind that you are not asking money for yourself, but instead are giving them the chance to partner with you in fulfilling the Great Commission. This sample letter is meant as a guide to give you an idea of how to write your own support letter. Try not to copy it word for word but instead give your letter a personal touch. Consider adding graphics such as a picture of you, map of the country you are going to, etc.

Dear << Name >>, This summer I have the wonderful opportunity of going to << name of country >> on a short-term mission's trip with << Gear Up Ministry >>. God has put this trip on my heart and I desire to go and be used by Him for His glory and minister to the people of << name of country >>. The trip to << name of country >> is scheduled for << dates of trip >>. Before we depart we will be spending time in orientation and preparing for various ministry opportunities. Ministry opportunities being planned includes << list the specific opportunities being planned for your trip >>. Before this trip can take place I need to trust God to provide a team of partners who will support me both in prayer as well as in finances. Some current prayer requests I have are: <> Thank you for praying for me. If you would be willing to be a prayer partner, please let me know and I will send you more prayer requests prior to our departure. The cost of the trip is approximately << \$\$\$ >>, which includes all my travel, lodging, food and trip insurance. I am expected to have one-half of the money by << give date >> and the balance by << give date >>. If the Lord leads you to support me financially, please consider sending your gift by << the day before the date when half is due >>. You can send your gift to me at the address below (or directly to the mission's organization, if applicable). You will receive a tax-deductible receipt from << Gear Up Ministry>> for your gift. Thank you so much for the time and consideration that you've given this request. Sincerely in Christ, << Your Name & Address >>

RELEASE AND ASSUMPTION OF RISK FORM

MISSION TRIP:

DATE OF TRIP:

NAME: ADDRESS:

HOME PHONE:

ALT. PHONE:

EMERGENCY CONTACT:

ADDRESS: HOME PHONE:

ALT. PHONE:

Please list any allergies, physical disabilities or medical information we should know about: Please list any medications that you will be taking: Please list any dietary restrictions:



## RELEASE AND ASSUMPTION OF RISK

1. I acknowledge that I have voluntarily applied for enrollment in the above listed short term mission trip and in consideration of being permitted to participate in such trip, do voluntarily execute this "Release and Assumption of Risk" in behalf of myself, my heirs and next of kin, my personal representative and my estate.

2. I acknowledge that I have been fully informed of the nature, scope and demands of the trip, and that I have met all of the prerequisites required for participation in this trip.

3. Gear Up Ministry sponsor many short-term mission trips. These trips usually involve a number of risks that may not be covered by insurance. The form below is for use by members and/or volunteers of Gear Up Ministry who participate on a trip that involves travel inside and outside of the United States. Gear Up Ministry will not have insurance to cover injuries or accidents that occur on such trips, and typically, Gear Up Ministry has no means of adequately supervising all activities involved on the trip. As a result, Gear Up members/volunteers who participate on such trips to assume all risks associated with them as a condition of their participation. In such cases, a form similar to this one is often used.

4. I am aware of the hazards and risks to my person and property associated with serving in a mission's capacity, such hazards and risks including, but not being limited to, death or injury by accident, disease, war, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity, and random acts of violence. I accept my assignment with full awareness of these risks, and, subject to any insurance coverages that may be available to me from any source, and only with respect to Gear Up Ministry and its agents, officers, directors, and employees, I voluntarily assume all risks of death, injury, and illness associated with such risks, and any damage to my personal property, and I release Gear Up Ministry and its agents, officers, directors, and employees from any liability whatever arising as a result of death, injury, or illness that I may suffer as a result of participation in the missions trip. I further recognize that such risks have always been associated with missionary service. 2 Corinthians 11:23-28.

5. I understand that every care and attention will be given to the health and comfort of the members/volunteers, but the church or its staff cannot be held liable for any injuries sustained which were not directly caused by their failure to take due care.

6. I hereby authorize the leader of the trip to secure such medical advice and services as may be deemed necessary for the health and safety of myself (or my son/daughter/ward) and I agree to accept financial responsibility, including in excess of the benefits allowed by provincial health insurance plans: a. Where the health and well-being of the applicant is involved. b. Where all attempts to contact the parent or guardian have failed or where due to the nature of the emergency there was insufficient time to contact such parent or guardian. It shall be at the discretion of the leader of Gear Up Ministry as to what action must be taken for the welfare and safety of the member/volunteer.

7. I accept and assume full responsibility for all harm and injury, of every nature, including death, which may occur to me or which I may suffer, and for all damages or loss to any personal property or property issued to me by Gear Up Ministry, while I am participating in the trip and, in furtherance thereof, I agree to indemnify and hold harmless Gear Up Ministry, and its employees, from and against any and all claims, demands, actions or causes of action, on account of damage to personal property, or to my personal injury, or death, which may occur or result directly or indirectly from my participation in the activity, and which results from causes beyond the control of and without the fault or negligence of Gear Up Ministry and its employees.

8. I agree to abide by the rules and regulations imposed on participants by the agency and its staff.

9. I agree that I will be cooperative and helpful to and with all other participants in the trip and will not be disruptive of the objectives established for the trip or as may be designated by the staff or group consensus.

10. I declare that I am in good physical health and believe that I am able without reservation or limiting conditions to physically withstand and cope with the indicated activities of this trip.

11. I request that this "Release and Assumption of Risk" be construed and interpreted pursuant to the laws of the State of North Carolina, and if any portion thereof is held invalid, I request that the remainder continue in full force and effect.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
City, State, Zip

**IMPORTANT:** Please have 2 witnesses observe your signature, and have them sign below. They must be at least 18, and should not be relatives.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Address

\_\_\_\_\_  
Witness

\_\_\_\_\_  
City, State & Zip

\_\_\_\_\_  
Address

## Biblical Unity on a Campaign

THE GOAL OF UNITY. The task of finally finishing the Great Commission is bigger than any one part of the Body of Christ. God wants to use the entire Body of Christ to finish this task. Gear Up seeks to be an answer to the prayer Christ Himself prayed in John 17:20-21: I do not pray for these alone, but also for those who will believe in Me through their word: that they all may be one, as You, Father, are in Me, and I in You; that they also may be one in Us, that the world may believe that You sent Me. UNITY BASED ON TRUTH. Gear Up Ministry seeks to serve as a catalyst for spiritual, Biblical unity in the Body of Christ as we serve various parts of the Body to Train, Share, Equip, and Connect. While we pray and work toward unity, we also are mindful of Paul's caution in Galatians 1:8, 9: But even if we, or an angel from heaven, preach any other gospel to you than what we have preached to you, let him be accursed. As we have said before, so now I say again, if anyone preaches any other gospel to you than what you have received, let him be accursed. STATEMENT OF FAITH. Unity must be based on truth. Cooperation that results in a dilution or compromise of the essential truths of the Bible is ecumenism, not Holy Spirit-breathed Biblical unity. We seek to work with all those who believe in the following Statement of Faith: God. We believe that the Godhead eternally exists in three persons--the Father, the Son, and the Holy Spirit- -and that these three are one God, having precisely the same nature, attributes, and perfections. Jesus. We believe in the deity of Jesus Christ, His virgin birth, sinless life, miracles, death on the cross to provide for our redemption, bodily resurrection and ascension into heaven, present ministry of intercession for us, and His return to earth in power and glory. Holy Spirit. We believe in the personality and deity of the Holy Spirit, that He performs the miracle of new birth in an unbeliever and indwells believers, enabling them to live godly lives. Bible. We believe in the divine verbal inspiration of the Scriptures. The whole Bible, in the original manuscripts, is without error. As the revelation of God, we believe the Bible to be the sole authority and sufficiency with regard to Christian faith and practice. Man. We believe that man was originally created in the image of God. Adam fell through sin, and as a consequence of his sin, lost his spiritual life. This spiritual death, or total depravity of human nature, has been transmitted to the entire human race of man, the Man Christ Jesus alone being excepted. Thus every person is born into the world with a nature that is essentially and unchangeably sinful apart from divine grace. Salvation. We believe that, due to universal death through sin, no one can enter the kingdom of God unless born again. Our redemption has been accomplished solely by the blood of our Lord Jesus. We believe that the new birth of the believer comes only through faith in Christ. No other acts, such as confession, baptism, prayer, faithful service, or manifestation of certain spiritual gifts, are to be added to believing as a condition of salvation. I agree with the Statement of Faith written above.

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

## MISSIONS CAMPAIGN POLICY

I realize that the following elements are crucial to the effectiveness, quality, and safety of our campaign together. As a member of the campaign team, I agree to:

1. Remember that you are a guest working at the invitation of a local pastor or nationalist.
2. Respect the host's view of Christianity. Recognize that Christianity has many faces throughout the world, and that the purpose of this trip is to witness and experience faith lived out in a new setting.
3. Develop and maintain a servant's attitude toward all nationals and my teammates.
4. Respect my team leader(s) and his or her decisions.
5. Refrain from gossip. You may be surprised at how each person will blossom when freed from the concern that others may be passing judgment.
6. Give all credit of accomplishments and favor to God; realize the amazing things God would allow the team to accomplish if we don't mind who gets the credit -for He deserves all the Glory.
7. Refrain from complaining. Know that travel can present numerous unexpected and undesired circumstances, but the rewards of conquering such circumstances are innumerable. You are to be creative and supportive.
8. Respect the work that is going on in the country with the particular department(s) or person(s) with whom we are working. Realize that our team is here for just a short while. You are to respect their knowledge, insights, and instructions.
9. Refrain from negative political comments or hostile discussions concerning our host country's politics.
10. Remember not to be exclusive in my relationships, not just one another.
11. Refrain from any activity that could be construed as a romantic interest toward a national. Realize certain activities that seem innocent in own culture may seem inappropriate in others.
12. I agree to be flexible and serve in whatever service area is allowed and open to me on the mission field.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Printed  
Name: \_\_\_\_\_

