

**North Greenwood Baptist Mission Trip Application
Non-Church Member**

Contact/Trip Information:

Your Name _____ Phone _____

Current Address _____

Email Address _____ Date of Application _____

Destination _____ Dates of Trip: From: _____ To: _____

Church that you are a member of _____ Phone _____

Church address _____

Pastor's Name _____ Phone _____

Testimony: Briefly share how you came to know Christ as your Lord and Savior. (use back if necessary)

Calling: Briefly explain why you feel led to go on this mission trip. (use back if necessary)

Pastor's Signature: I _____, as the pastor of _____, recommend this person to serve on the above listed mission team. This person is a Christian, walking daily with Christ, and in good standing with this congregation of believers.

Pastor's Signature _____

Parent Signature: If you are under age 18 please have your parent/guardian sign their name as permission for you to participate in this mission project.

Parent Signature _____

FOR MISSIONS COMMITTEE USE ONLY

Amount Approved \$ _____ Date _____

Missions Committee Chair _____