

SHORT-TERM MISSION TRIP APPLICATION

Please complete and return this along with your down payment to your trip leader or the BCC church office.

TRIP LOCATION	TRIP DATES	
TRIP LEADER	TOTAL TRIP COST	
NAME		
ADDRESS		
CITY	STATE ZIP	
EMAIL	PHONE	
BIRTHDATE	SPOUSE NAME (if married)	
EMERGENCY CONTACT	RELATIONSHIP	
EMERGENCY CONTACT NUMBER		
NAME ON PASSPORT (exactly as listed)		
PASSPORT #	EXPIRATION DATE	
MY RELATIONSHIP TO BUFFALO COVENANT CHURCH		
☐ Member ☐ Regular Attender ☐ Visitor	How many years have you attended BCC?	
If not a BCC attender:		
Home church	Church website	
Personal reference and contact info		
What ministries have you been involved with at BCC or at your home church?		
Please share you how you came to know Jesus Christ as your Savior:		

Please describe your ongoing relationship with the Lord.	
What are some of the ways you feel prepared to minister evangelism, adult ministry, children's ministry, physical co	
What gifts, talents, abilities, language and/or professional a short-term mission trip?	skills do you have that might contribute to our ministry on
Describe your experience working on a team.	
Why do you want to serve on this mission trip?	
By signing and submitting this application, you agree to the following: • to attend all planning meetings. • to complete and submit a Background Investigation Form. • to abstain from all drug and alcohol use while on the mission trip. • to participate in all meetings and group activities while on the mission trip. • to maintain a good attitude, embracing local customs, language, and food. • to represent yourself and Buffalo Covenant Church in a way that honor and glorifies Jesus Christ. SIGNATURE	
OFFICE USE ONLY:	
Down Payment Received	Date:
Balance Received	Date
Notes	