



Fellowship of Christian Farmers, International

MISSION TRIP APPLICATION

Serving, Sowing, Reaping for Christ Around the World

Contact Information

Name _____ If minor - age _____
 Street Address _____
 City, State, Zip _____
 E-mail Address _____ Home Phone _____
 Work Phone _____ Cell Phone _____
 County/Province of Birth _____

Health Information

Date of last physical exam: _____ Present Health: Good Fair Poor
 Do you wear contact lenses? yes no
 Do you have any handicaps? yes no Explain: _____
 Are you presently taking medication? yes no Explain: _____

Skills/Experience

Languages Spoken/Read _____
 Vocal Ability (Experience with solo, group, choir, etc.) _____
 Explain how you feel your skills, hobbies, and professional training could be beneficial on an overseas mission field.

List all previous overseas field experiences below:

Field:	Project/Crusade:	Date:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Publicity

Please list local newspapers and TV/Radio stations that potentially could run a story about your mission trip.

Newspaper Name _____
 Address _____
Radio Name _____
 Address _____

Do you have the capability to present either a slide show using a slide projector or Powerpoint using a Powerpoint projector?

Slides Powerpoint Both

Trip Information

Crusades for which you are applying:

Work Crusade:

- Honduras Mexico
 Jamaica Missouri

Agricultural Evangelism Crusade:

- Russia Tanzania
 Albania

Trip Date:

1st choice _____

2nd choice _____

Check all that apply:

- I am interested in sharing my Christian faith with businessmen and professionals overseas.
 I am interested in using my professional skills overseas.
 I am interested in using my professional equipment, materials, or supplies.
 I would like to be on your mailing list for the "Profit" newsletter.
 I would like information about FCFI chapters in my area.
 I would like information about starting a chapter in my area.
 I would be interested in starting a worship service at my farm group meeting.
 I would be interested in assisting with a FCFI farm show booth in my area.
 I would be interested in sharing my testimony in the "Profit."

Evangelism Crusade Applicants Only

State briefly why you wish to participate in an evangelism crusade: _____

Have you ever led another person to Christ? yes no Using what methods? _____

Describe your prayer and Bible study habits: _____

Passport

You must have a passport for overseas travel. Do you have a passport? yes no

Passport Number _____ Issued Where _____ Date _____

Foreign travel by its very nature offers an unfamiliar and unique environment, and risks of injury to both persons and property are inherent. I understand that by my participating in an FCFI crusade I am indicating my acceptance of these risks.

In consideration of my being on an FCFI crusade, I indicate by my signature below that I voluntarily release the Fellowship of Christian Farmers, International, Inc. and each of its employees, trustees, officers, and agents of the negligent or other acts or omissions of FCFI, its agents or employees.

I further agree to indemnify FCFI and each of its employees, officers, and agents for any expenses or costs resulting from these acts or omissions, or resulting in any way from my participation in an FCFI crusade, including my own negligence. I am aware that basic accident insurance coverage is provided as part of the FCFI crusade program, but that this insurance may not cover all situations.

Furthermore, I understand that there is no personal property insurance provided through the FCFI crusade program, and that such insurance is considered a personal responsibility of the program participant.

Signature: _____ **Date:** _____

In case of emergency, notify: Name _____

Phone _____ Address _____

Refer to schedule for amounts. Make check payable to FCFI and mail to:
Fellowship of Christian Farmers • PO Box 15 • Lexington, IL 61753 • Phone/Fax: (309)365-8710