

Impact Trip Application

2018-19

This application must be completed for anyone applying for a Calvary Impact trip. To be accepted as a team member on any of the Calvary Impact trips, you must turn in this application and the deposit by the trip's deadline (all checks to Calvary Church). This information can be found at **www.calvarychurch.us/connect/impact**. There is no guarantee of available spaces after the deadline for your trip.

QUESTIONS Vonn Dornbush / 651.558.2603 / vonn.dornbush@calvarychurch.us

NAME OF TRIP _____

Date: _____

First, Middle, & Last Name: _____ Male Female

Address: _____ Date of Birth: _____

City: _____ State: _____ Zip: _____

Telephone (Home): _____ (Cell): _____

Email: _____

Frequent Flyer (American): _____ Frequent Flyer (Delta): _____

I have been a member attender of Calvary for _____ year(s) Other: _____

Name of staff or other Calvary reference: _____

Reference phone number: _____

Describe your involvement at Calvary: _____

Describe your spiritual relationship with God and your salvation experience: _____

Since giving your life to Christ, what do you do on a regular basis to grow in your faith? _____

Please continue on next page.

Why do you think God is calling you to go on this trip? _____

What talents or gifts do you have that you feel the Lord can use on this trip? _____

In what aspect of this trip are you most excited to participate? _____

You will need to raise your own support for this trip. We will provide preparation and fundraising opportunities to help raise your support. Are you committed to this process and willing to trust God's direction through the results? ____ Yes ____ No

By signing this application, I recognize I am responsible to raise my own financial support for this trip. If I am unable to raise the total amount, I understand that I will be required to pay the remaining balance. Should I choose not to go on this trip, I am still fully responsible for all non-refundable costs incurred (e.g. airfare, already-purchased food, housing costs). Furthermore, should external factors change our plans for this trip, I recognize that some funds may not be refundable.

I am agreeing to be a team player on this trip and do whatever it takes to serve others, honor God and share Jesus through my words and actions.

Signature _____ Date _____

For Parents/Guardians of Applicant's Under 18 Years Old: I agree to the above financial responsibilities. Additionally, I commit to pray for and support my child as they prepare spiritually, mentally, and physically for this trip.

Parent/Guardian's Signature _____ Date _____

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Approved Not approved