

CALVARY STUDENTS | MISSION TRIP APPLICATION 2019

If you have questions, please contact the Student Ministry's Office (sheetderks@calvarygr.org) at 956-9377, ext. 5161.

CHECK THE BOX NEXT TO THE TRIP YOU ARE APPLYING FOR:

**5th-6th:
Camp Serve**
July 30- August 1
Application Deadline:
May 1
\$65 Payment in Full
Trip Cost: \$65

**7th-8th:
West Virginia**
July 20-27
Application Deadline:
March 27
*\$50 Deposit
(non-refundable)*
Trip Cost: \$495

**9th-12th:
Detroit, MI**
July 26-31
Application Deadline:
February 11
*\$50 Deposit
(non-refundable)*
Trip Cost: \$760

**9th-12th:
Grand Rapids, MI**
June 21-24
Application Deadline:
February 11
*\$50 Deposit
(non-refundable)*
Trip Cost: \$329

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____

EMAIL: _____

PARENT/GUARDIAN EMAIL: _____

GRADE (CURRENT SCHOOL YEAR 2018-19): _____

GENDER: _____ DATE OF BIRTH: _____

Several expenditures are made on behalf of each team member in advance of the trip, including payment to partner organizations and transportation (such as airfare). Because God has been faithful in providing full funding for past trips and in anticipation that He will do so again this year, the church has agreed to loan our teams the funds for these purchases. Each participant must understand, however, that this advance funding mechanism is only a loan to facilitate trip planning, and each participant is responsible for these costs. In an effort to clearly communicate this financial arrangement, the following Memorandum of Understanding must be signed and turned in with your application. Acceptance for the trip is contingent upon execution of this document.

MEMORANDUM OF UNDERSTANDING:

Dear Calvary Church,

I _____, agree to be personally responsible for the payment of any balance due for my portion of advance payments to partner organizations such as YWAM, should my full financial support not be raised two weeks prior to departure. I also agree to be personally responsible for these costs if I am unable to participate in the trip.

Student Participant Signature: _____

Date: _____

Printed Name of Student: _____

Parent/Guardian Signature: _____

Date: _____

Printed Name of Parent/Guardian: _____

To apply, present the following to the address below:

- Deposit*
(Deposits are non-refundable)
- Signed Application
5th-8th Grade Only.
- Answers to questions below.

CALVARY STUDENT MINISTRIES
PO BOX 1600
GRAND RAPIDS, MI 49501

Make checks payable to Calvary Church.

**Due to IRS regulations, nothing may be written on the memo line of your check.*

Attach a separate sheet of paper with typed answers (or print neatly on the back of this sheet) to the following statements & questions:

- Describe your relationship with God. Tell us about when you decided to follow Jesus, how you spend time with Him, and what you want other people to know about Him.
- Why do you want to be part of this mission trip?
- What are some ways you have served God at home or school? Are there any ministries you are involved in at Calvary?

OFFICE USE ONLY -----

Date Received: _____ Questions Received Deposit Received, Method: _____

Interview Date: _____ Interviewed By: _____ Arena Approved? Yes No Deposit to Finance