



Dear students and parents,

We are excited for the opportunity to serve in Mexico again this year. We will be returning to the Calvary Chapel Bible College in Ensenada June 9th-12th (Thursday - Sunday). Our goal and mission is to serve the Bible College through work projects, and to visit and bless a local orphanage by providing a bible lesson/craft and lunch. And of course we will also be doing our own bible studies, enjoying fellowship, eating tacos and going to the beach.

Please pray about joining us, and fill out the following application.

If you're a parent that would like to help drive students contact me: chris@ccsantee.com

If you have any other questions, let me know.

- Pastor Chris

HIGH SCHOOL MEXICO MISSION APPLICATION

JUNE 9-12, 2022 — Ensenada Mexico

TRIP COST: \$120.00: Includes accommodations, transportant and most meals (except tacos)

MINISTRY FOCUS: Serve at an orphanage, help with Calvar Bible College Ensenada work project

FOR: High school students who have already completed 1 year or more of high school (as of June 2022)

APPLICATIONS DUE: SUNDAY, MAY 29th

Submit \$120.00 with application and a copy of your passport or birth certificate to the Welcome Desk

GENERAL INFORMATION:

Name: _____ Date of Birth: _____

Address: _____
Street City State Zip

Cell Phone: _____ Email: _____

I am over age 25 and can drive. Type of vehicle: _____

Complete below if you are a minor:

Father: _____ Mother: _____

Father's Cell () _____ Mother's Cell () _____

Father's Email: _____ Mother's Email: _____

Emergency Contact: Name of person who you KNOW will be available while you're away

Name: _____ Relationship: _____

Address: _____
Street City State Zip

Phone: _____ Email: _____

PASSPORT/ID

Passports are preferred but not mandatory. Under 18 can use a birth certificate and photo ID. select one:

I have a passport:

- Attach a copy of your passport to this application.

I am applying for a passport:

- Apply for a passport at the Post Office. Download application at www.usps.com
- Call ahead to find out when they accept passport applications and make an appointment.
- Turn in a copy of your passport to us when you receive it.

I do not have a passport:

- If you do not have a passport you will need your birth certificate and a photo ID.
- Attach a copy of your birth certificate and ID to this application.

MINISTRY EXPERIENCE

1. Have you been to Mexico before, if so when and for what purpose? _____

2. What languages do you speak other than English? _____

3. Are you comfortable speaking in front of a group? _____

4. Have you ever been involved with any other type of outreach or ministry? Yes No

If so, when and where? _____

5. Are you currently involved in any kind of ministry? Yes No.

If Yes, describe: _____

6. How well do you react under pressure? (Explain): _____

Special skills and experience in: (check all that apply)

Wireless communication

Computer

Photography

Guitar/lead worship

Journalism

Videography

Drama

Singing

Sports or Coaching

Nursery Care (babies)

Taught Sunday school (if yes, what age group?) _____

Construction (specify): _____

HEALTH

Please answer the following questions accurately and honestly. All information will be handled with a high standard of professional confidentiality. We are collecting and keeping this information on record so that we can provide medical personnel with complete information should a medical emergency or serious illness occur.

1. Describe your general health and physical fitness. _____

2. Do you have a physical condition that may limit your ability to perform the ministry for which you have applied? Yes No. If so, please explain. _____

3. Are you presently under medication prescribed by a physician? Yes No

If yes, please list: _____

4. Will you be taking medication while on this mission trip? Yes No

If yes, explain: _____

5. Do you require a special diet? _____

6. Do you suffer from a weak stomach or motion sickness? _____

7. Have you ever been treated for a nervous, mental, or emotional disorder? Yes No

If yes, what was/is the nature of the disorder? _____

Health conditions: Please check if you suffer from any of the following:

Asthma

Arthritis

Neuro-muscular disorder

Diabetes

Epilepsy

Anxiety Attacks

Food allergies (Explain): _____

CONSENT TO TREATMENT

Applicant's Name (herein "Team Member")

Calvary Chapel Santee
Church (herein "Organization")

June 9th - June 12th 2022
Travel Dates

Chris Dufour - Youth Pastor
Team Leader (herein "Agent")

I, _____ as the team member's Legal Guardian, do hereby authorize the Agent, acting as the Team Member's agent, to consent to any x-ray examination, anesthetic, medical or surgical diagnosis, or treatment and hospital care or service, which is deemed advisable and is rendered under the general or specific supervision of any licensed physician and surgeon, or the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being rendered, but is given to provide authority and power on the part of the Agent to give specific consent to any and all such diagnosis, treatment, or hospital care which the above mentioned physician, in the exercise of his/her best judgment, may deem advisable. I hereby authorize any hospital which has provided treatment to the Team Member to surrender physical custody of the Team Member to the Agent upon completion of treatment. These authorizations shall remain effective through the above said dates unless sooner revoked in writing and delivered to the Agent.

Applicant's Name

Applicant's Signature

Date

Parent/Legal Guardian's Name

Parent/Legal Guardian's Signature

Date

LIABILITY RELEASE

I, THE UNDERSIGNED, AM AWARE THAT DURING THE CALVARY CHAPEL SANTEE PRACTICUM, certain risks and dangers may occur which are out of the control of Calvary Chapel Santee and/or its organizers. As part of participating in said practicum, I have and do hereby assume all the risks and will hold Calvary Chapel Santee and its affiliates, workers and employees harmless from any liability, actions, suits, legal or otherwise.

UNDER NO CIRCUMSTANCES will Calvary Chapel Santee and/or its organizers be held responsible for:

1. Illness, death, accidents or injury;
2. Delays, personal injury, property damage or any loss resulting from so-called "Acts of God", act of public enemies, arrest or restraint of any government, seizure under legal process, quarantines, restrictions, riots, civil commotions, strikes, war hazards or terrorist activities;
3. Loss of personal property, possessions or monies;
4. Any act of neglect of any person or company whose services are trained by Calvary Chapel Santee for the benefit of our practicum;
5. Any deviation, delay or curtailment of any kind which is beyond the control of Calvary Chapel Santee;
6. Additional expenses, if incurred under any of the above circumstances, are the responsibility of the participant (yourself.)

I hereby also acknowledge the fact that Calvary Chapel Santee and any of its workers, servants, volunteers, and/or employees have the right to terminate my participation in this practicum at any time, because of health, unwarranted conduct, or any other reason they deem harmful or detrimental to the group as a whole.

High School Mexico Mission
Name of Sponsored Activity / Event

6/09/2022 6/12/2022
Event Dates: Begins Ends

Applicant's Name (Print)

Applicant's Signature Date

Parent/Legal Guardian's Name (Print)

Parent/Legal Guardian's Signature Date

APPLICATION AGREEMENT

By signing below I am agreeing that I have answered every question on this application to the best of my knowledge honestly and with a clear conscience.

Applicant's Signature

Date

Parent/Legal Guardian's Signature

Date

Thank you for a desire to join us, We will inform you once it this application has been reviewed.
Please let me know if you have any questions.

- Chris DuFour, Youth Pastor
chris@ccsantee.com

Submit This Application to The Welcome Desk in the Lobby

Calvary Chapel Santee • 10920 Summit Avenue • Santee, CA 92071 • (619) 258-1946