

APPLICATION

TRINITY UNITED METHODIST JAMAICA MISSION

Name _____ Home Phone _____

Address _____

E-Mail _____ Work Phone _____

Pager _____

Area(s) in which I would like to work: Education _____ Construction _____

Medical _____ Other [specify] _____

My specialty or areas in which I could contribute: _____

Please provide a brief statement of why you would like to participate in this mission.

As a member of the Jamaica Team I am willing to be involved in preparations for the trip by participating in the following:

- * Collect team supplies [medicines, medical, education or construction supplies]
- * Collect Bibles, toothbrushes, toothpaste, etc.
- * Break down and sort sample and donated medications [packing meetings or at home]
- * Attend team planning/preparation meetings unless prohibited by distance or work schedule
- * Follow the Guidelines of the United Methodist "Volunteers in Mission" – available in the office
- * Assist with team needs during the mission by serving on assigned work teams such as loading boxes and supplies on the bus, helping other work teams as needed [preparing school crafts, counting pills, etc], participate in all total team activities [such as devotionals, team sessions, infirmary visits].

Signature _____ Date _____

Print name as it appears on Passport _____

Delta FF # if you have one _____

Emergency contact – name and phone numbers _____
