

Blessing the Children International

Missions Application

Applying for trip to:
Mission Trip – Dates:
☐ Internship – Dates:
Study Abroad – Dates:
Missionary – Dates:

Please attach a recent photo here. Attach also to email if emailing this application.

Street Address: City: State: Zip: C Cell Phone: - Best time to call: Home/Other Phone: - Best time to call: Email: Gender: Age: Date of Birth: Marital Status: Single Engaged Married Divorced Widowed	State: Zip: Country: Best time to call: Best time to call: Age: Date of Birth:
Cell Phone: () - Best time to call: Home/Other Phone: () - Best time to call: Email:	- Best time to call: - Best time to call: Age: Date of Birth:
Home/Other Phone: (- Best time to call: Age: Date of Birth:
Email: Age: Date of Birth:	Age: Date of Birth:
Gender: Age: Date of Birth:	Age: Date of Birth:
Marital Status: □Single □Engaged □Married □Divorced □Widowed	
If married, spouse's name:	use's name:
Are you currently enrolled in college? □No □Yes If yes, complete the following:	
	No Type If was complete the following:
College: Major:	ed: Graduation Year: GPA (4.0 scale):
College Address:	ed: Graduation Year: GPA (4.0 scale): Major:
College Address:	ed: Graduation Year: GPA (4.0 scale): Major:
	ed: Graduation Year: GPA (4.0 scale): Major:
∥. Family Information (if under 21 years of age)	de: Graduation Year: GPA (4.0 scale): Major: (if under 21 years of age)
II. Family Information (if under 21 years of age) Parent(s)' Name(s):	ded: Graduation Year: GPA (4.0 scale): Major: (if under 21 years of age)
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II. Family Information (if under 21 years of age) Parent(s)' Name(s): Street Address: City: State: Zip: Home Phone: () Best time to call: Other Phone: () Best time to call: Email: III. Employment Information Occupation:	det: Graduation Year: GPA (4.0 scale): Major: (if under 21 years of age) State: Zip: - Best time to call:

IV.	Insights			
	How did you hear about Bles	ssing the Children?		
	☐Google ☐ChristianConn	ector.com Short	TermMissions.com □C	Other:
	What motivated you to volun	teer for this trip?		
	List your skills, hobbies and	abilities and their re		
	What do you hope to accom	plish on this trip?		
V.		ssion's trip? □No /ministry served:		
VI.	Length of trip(s): Travel Information			
	Nearest city with a major airp What size t-shirt do you take Country of Citizenship: Do you have a valid Passpor	oort from which you ? □Small □Medi	um □Large □X-Large	e □XX-Large □XXX-Large
VII.	References (not immed	diate family membe	rs)	
	Name & Relation:			
	Phone & Email:			
	Name & Relation:			
	Name & Relation:Phone & Email:			
nature repres me in	irge any and all rights and claims for inju , which I may have or which may he entatives, successors, and/or assigns, in	ry or illness (including de ereafter accrue to me a dividually or collectively for	ath) whether physical, mental, gainst Blessing the Children or any and all damages and li	, and administrators waive, release, and forever, or emotional, or property damage or loss of any International, their members, officers, agents, abilities which may be sustained and suffered by irith, and return from any Blessing the Children
previ	•	curately to the best of	of my ability. Team & N	Policies and that I have answered the Aissionary Policies available here:
Print	ted Applicant Name:		If applicant is unde	er age 18, parent/guardian must sign:
Signed Date				
			Signed	Date
by ca	pleted application may be submitted valing (888) 269-2719. Otherwise plead- d-signed application must be mailed, earlied, earlied	se mail a check with the even if submitting the ap	ne signed application to:	he application fee (\$40) paid by credit card Blessing the Children International 2265 Fraser Road Kawkawlin MI 48631-9145

Toll Free: 888-269-2719