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(973)383-4461 [www.lfc.org/students](http://www.lfc.org/students)



## SUMMER YOUTH MISSIONS APPLICATION

Hey Missions-Minded Students!

Are you ready for an awesome experience? God is on the move, doing great things all over the world and He is looking for people to use their talents, time and passion for the gospel message to make an impact. Below are some steps to take to start the process.

- ✓ **Step 1: PRAY.** Pray that God will confirm your involvement with the team this summer. Pray with your parents for guidance as you pursue this adventure! We can't over emphasize the importance of prayer both on this trip and for life in general.
- ✓ **Step 2: APPLY.** Applications are due no later than **Sunday, April 14th, 2019**. Please be sure to know all the details of the trip (dates, who is eligible to go, cost, travel details, etc.) , and feel free to ask questions if there are things you're not sure of. Take your time - please don't rush through this! Your efforts will pay off.
  - **Attach a non-refundable \$50 deposit to this application. Checks made Payable to LFC**
- ✓ **Step 4: WAIT PATIENTLY (and continue to pray)**- Either Pastor Ryan or Brian will contact you about the trip and your involvement.

**God is at work** within our youth ministry! Because of the impact that Jesus has had on each of our lives, we are looking for students who are passionate about **sharing the gospel** with the lost, the forgotten, the sick, the weak, the hurting, the broken... We are looking for students who want to use their time and talents to do whatever God asks of them! **Are you ready to serve?**

**-Note to parents:** **more** information will follow. This is meant to answer just some basic questions about our summer missions trips. Upon acceptance to the team, we will hold a parent/team member informational meeting that will attempt to answer any further questions that you might have.

**Trip Details** Where are we going? What are we doing? Who can go?

**Sussex Project: June 25<sup>th</sup>-29<sup>th</sup>, 2019 -- Cost: approx. \$150\* Deposit: \$50\*\***

Here's a missions trip in your back yard! We are very excited to be putting together a trip that brings the gospel message to people here in Sussex County. We will be partnering with a few other churches to do some local projects and share the gospel through ministry to children through things like games and a backyard bible club approach. We will be staying at the church all week, worshipping together, serving together, and sharing the gospel together. No matter what your skill set you would be a valuable part of this team!

**Qualifications for the trip:** we are looking for students who are:

1. a follower of Jesus Christ (we'll ask for your testimony later)
2. Willing to be flexible
3. currently in 7th-12th grade and committed member of LFC's student ministry

- \* ***These prices reflect the HIGHEST amount that we expect the trip to cost. If there is a reduction in the cost of the trip, we will notify you as soon as possible.***
- \* ***If, for any reason, you are not accepted for this team, your deposit will be refunded. Just make sure to submit it with your application! Thanks.***

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ \_

Grade you will be completing: \_\_\_\_\_ Parents Names: \_\_\_\_\_

Email: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

**HEALTH INFORMATION** **(PLEASE PROVIDE A COPY OF YOUR INSURANCE CARD)**

Name of Insurance Company: \_\_\_\_\_

ID Number: \_\_\_\_\_ Group Name/Number: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Please list **all** allergies including allergies to medications and food:

\_\_\_\_\_

Please list any medications which you are currently taking including both prescribed and over the counter:

\_\_\_\_\_

Please list any medical conditions that you have:

\_\_\_\_\_

Name of your physician: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Any other health concerns we should know about? \_\_\_\_\_

\_\_\_\_\_

**Previous Missions Experience**

If you have previous short-term missions experience, please list them below.

Location

Year

Church/Organization

1. \_\_\_\_\_

2. \_\_\_\_\_

**LFC Involvement**

Do you regularly attend the LFC youth ministry? Y / N

Is LFC your home church? Y / N

If Not, what church do you regularly attend? \_\_\_\_\_

**Trip Information and Commitment**

Are you committed to helping to contribute to the overall unity of the team, striving to contribute your gifts, as well as relying on the giftings of others on the team for this trip to be an overall success?  
o Yes o No

Are you committed to attending ALL of the training sessions required to prepare us for the work and ministry that is ahead of us?  
o Yes o No

By signing this statement, you are agreeing to **trust in the Lord** for the supplying of the necessary finances and prayer support for the team and to submit to the leadership of this team. As a parent, by signing this, you are supportive of your child’s involvement in this missions trip.

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

Take your time as you work through these questions. Please, please - **write neatly!**

1. Briefly explain why you want to participate in this trip.

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