## ***IF I AM ACCEPTED TO BE ON THIS MISSION TEAM, I UNDERSTAND AND AGREE TO MEET THE FOLLOWING REQUIREMENTS:***

I will be responsible for the financial support of my trip, including housing, meals, airfare, necessary immunizations, and passport. I understand that a valid U.S. passport is required.

For the success of this mission and well being of the whole team, I will submit to the authority set over the team both in the U.S. and in the country where we minister. **I understand that I am expected to attend ALL preparation and training sessions. The team training sessions are as follows and includes lunch:**

Initial Gathering & Training:
Parents &Team Members January 30th
at the Rhodes'/Trinity, BR 10 AM—12 PM
**$100.00 deposit required at this initial gathering**

| | | |
|---|---|---|
| Session 1 | February 20th @ Rhodes'/Trinity, BR | 10 AM—3 PM |
| Session 2 | March 20th @ Rhodes'/Trinity, BR | 10 AM—3 PM |
| Session 3 | April 17th @ Rhodes'/Trinity, BR | 10 AM—3 PM |
| Session 4 | May 29th @ Rhodes'/Trinity, BR | 10 AM—3 PM |
| Commissioning | May 30th at your home church worship service | |

I will cooperate with the team leader's directives and decisions before and during the trip, understanding that the leader may at any time ask me to leave the team for the well being of the team.

During the trip, I will accept conditions that may be different and uncomfortable compared with those I am used to in the U.S., particularly in regard to cleanliness, sanitary facilities, and food safety. So that I will not hamper the team through avoidable illness, I will acquire all recommended immunizations and will carefully follow the health guidelines established for the team. I will respect the mores of the culture in which I will be ministering and will agree to follow recommended dress standards. I also agree not to smoke or drink alcoholic beverages at any of the team meetings, while in the country that we are ministering, or in traveling to and from said country.

I certify that all of the information I have supplied in this application is true to the best of my knowledge.

Signature _____ Date _____

Please return this form to Fr. Joe Rhodes at:
2280 Clematis Trail
Sumter, SC 29150
Joetina71@aol.com

**RETURN BY December 12, 2009**

# HONDURAS 2010
# SHORT TERM - MISSION APPLICATION

**DESTINATION: Tegucigalpa, Honduras**
**MINISTRY: High School Retreat & VBS at St. Mary's School**
**Retreat & VBS at El Hogar Orphanage**
**VBS at San Isidro, El Cruce**

**COST: Around $1,850.00**

**DATE: June 4-17, 2010**

**PERSONAL INFORMATION:** Please type or print clearly.

Name:
(First) (Middle) (Last)

Address:

City: State: Zip:

Telephone: (H)

(Cell)

E-mail:

Birthdate: Gender (M/F) Single/Married: How Long?:

Home Church:

Address:

City: State: Zip:

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Who will be your Contact Person:

Name:

Phone:

Email: