



Global Outreach Team/Vision Team Application

Please fill out this application and send to Horizon International | Attn: Short Term Teams | P.O. Box 180 | Pendleton, IN 46064-0180.

Today's Date _____

Name of Leader: _____

Date of Trip: _____

Personal Information

Last Name: _____ First Name: _____ Middle Initial: _____

Preferred Name: _____

Permanent Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

E-mail: _____

Age: _____ Date of Birth: _____ Birthplace: _____

Citizenship: _____ Marital Status: _____

Name as It Appears on Passport: _____ Passport #: _____

****Required: Attach a copy of the photo page of your passport.**

Emergency Contact

Name: _____

Relationship: _____

Phone Numbers (Home; Work): _____

E-mail: _____

Medical Information

Please list any medicines you are required to take regularly _____

Please list any medical conditions for which you are presently taking medication. _____

Family Information

Names & Ages of Participating Children:

Church/Fellowship you attend: _____

Pastor: _____ Phone Number: _____

Church's Mailing

Address: _____

City: _____ State: _____

How long have you been attending: _____

Checklist

_____ Enclosed is my/our photo page of passport.

_____ Enclosed is my/our \$500 per person nonrefundable deposit (**Due** _____).

_____ Enclosed is my/our signed/dated Agreement Form.

_____ Enclosed is my/our signed/dated Medical Release Form.

Yes, I/we would like to secure medical insurance to cover expenses related to accident, illness, and medical evacuation while traveling.

_____ Yes, I/we would like to sponsor one or more *Horizon* orphans in Africa at \$35 per child per month. Send me information.

Personal Responses

Please take the time to be reflective and answer the following requests or questions. Feel free to use the back of each sheet to complete your responses.

1. Share your reasons why you would like to participate on this Global Outreach Team/Vision Team:

2. What personal goals or expectations do you have?

3. What outcomes would you like to achieve?

Please return to: *Horizon International* | P.O. Box 180 | Pendleton, IN | 46064-0180

10/27/2009