

Faith Christian Community
Student Mission Application
 (17 and younger)

Applicant Information

Legal Name _____ <small style="text-align: center;">As it appears on travel document (i.e., Passport, Visa)</small> Address _____ City _____ Hm Phone _____ Cell Phone _____ Emergency Contact Name _____ Travel Document Type <input type="radio"/> Passport <input type="radio"/> Visa Are you taking any special medication? <input type="radio"/> No <input type="radio"/> Yes Do you have allergies or physical limitations? <input type="radio"/> No <input type="radio"/> Yes Frequent Flyer No./Airlines. _____ Redress Number _____ <small style="text-align: center;">Applies to Alaska Air Grp for travelers whose name is similar to a TSA watch name</small> List church home/affiliation _____	State/Province/County _____ Zip/Postal Code _____ Country of Citizenship _____ E-Mail _____ Emergency Contact Telephone _____ Travel Doc. No. _____ Exp _____ Please list _____ Please list _____ Birth Date _____ Grade _____ Gender _____ Adult T-Shirt Size <input type="radio"/> Small <input type="radio"/> Medium <input type="radio"/> Large <input type="radio"/> XL
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Parent/Guardian Information

Father/Guardian's Name _____	Mother/Guardian's Name _____
Relationship to applicant _____	Relationship to applicant _____
Phone _____ Work _____ Cell _____	Phone _____ Work _____ Cell _____
E-Mail Address _____	E-Mail Address _____

Why are you considering this mission trip?

List the service opportunities you've participated in this year?

Write one question you have for God.

How do your parents feel about you attending this mission?

Do you have any special prayer requests?

Applicant's Signature

Date

Parent/Guardian's Signature

Date

