

7. MISSION EXPERIENCE & SKILLS

If you have had previous experience of mission work outside of BTBAB briefly describe below:

What ministry areas are you interested in and what are your main skills?

8. DECLARATION AND SIGNATURE

I can confirm that the information supplied in this application form is accurate to the best of my knowledge and ability.

.....
Signed

.....
Date

This application form can only be considered when ALL of the items listed below have been received by BTBAB:

- **Completed** application form including signature and all requested information
- £50 deposit (Cheques payable to BTBAB Blessed to be a Blessing)

You can post your application and deposit to **BTBAB, PO BOX 1260, SUNDERLAND, SR5 9WW** OR you can email a completed copy of the form to **info@btbab.org** and post your deposit.

We will confirm your application when we get your form and deposit, please contact us if you do not receive a confirmation.

For further information or help regarding this application email Kathryn Tims at **info@btbab.org**



We are delighted that you have decided to participate in Blessed to be a Blessing's mission team to Cambodia in 2010. We truly believe that you are about to have one of the most privileged experience of your life as a Christian. Missions is at the core of God's heart in the earth.

Missions does not begin when you arrive in Cambodia, but from the moment you say 'yes' to go. We strongly believe that mission is not an event but rather it is a journey - a journey where God is more interested in what happens *in* you, than in what you *do*. In order to start this journey we need some information.

We thought long and hard about this application form as we didn't want it to be a barrier to anyone wanting to come on this trip, but we are going to need this information at some point, so you might as well get it over and done with!

1. CONTACT INFORMATION

Name– as on your passport Mr Mrs Miss Other _____

First Middle Last

Nickname, if you prefer to be known it: _____

Postal Address:

House/ Flat no. / Street

Town/City County Postal Code

Phone: _____

Home Mobile

E-mail address: _____

2. ABOUT YOU

Age: ____ Birth date: _____ Sex: Male Female

Place of Birth: _____ Citizenship: _____

Passport Number: _____ Date of Expiry: _____

Marital Status: Single Married Engaged Separated Divorced Widowed

Spouse's Name: _____ Fiancé/ée's Name: _____

Are you able to pay all your own expenses: Yes No (See info leaflet for expected costs)

3. EMERGENCY CONTACT DETAILS (Only used in case of emergency)

Contact: _____ Relationship: _____

Address:

Street _____ City _____

County _____ Postal Code _____

Telephone: _____
Landline _____ Mobile _____

E-mail: _____

4. CRIMINAL CONVICTIONS

Do you have any criminal convictions? Yes No

If Yes, please give details below, continue on a separate sheet, if needed. In particular offences involving children must be declared.

5. MEDICAL CONDITIONS

Is there anything concerning your medical history or state of health that is relevant to your application?

Please include information on any allergies, special dietary requirements, medication, mental health and mobility issues. (use separate sheet if required).

6. PASTOR / CHURCH INFORMATION

We will be ask your church leader for a simple reference confirming that you are an active member of their church family, how long you have attended the church and that you have the church's blessings to go on this trip. To make things as smooth as possible, please make sure they are aware we will be contacting them and that you have their permission to give out any personal contact details. Unfortunately we can not confirm your place on the team until we have heard from them.

Contact name _____

Role e.g. Pastor, Minister, Mission Co-ordinator _____

Church Name: _____

Address:

Phone: _____

office

Alternative Phone: _____

Please tell us where this number is for e.g. 028##### (home no.)

Email: _____ Website (if available) _____

Fax (if available) _____ Denomination: _____