

**RBBC Missions Project
Volunteer Application Form**

Affix
Passport
Photo
Here

Project Name: _____

Project Leader: _____ Project Dates _____ Application Date _____

Please complete this form in its entirety and send to RBBC, 4000 Dayton Boulevard, Chattanooga, TN 37415, Attn: Missions Department. Please PRINT in black ink. Sign the form where indicated. Note: It is important that you use your name as it appears on your passport and other legal documents.

LAST NAME _____ FIRST NAME _____ INITIAL _____

DATE OF BIRTH (MO/DAY/YEAR) _____ SEX (MALE OR FEMALE) _____

MAILING ADDRESS (Where you want your correspondence sent)

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE NUMBER _____ WORK PHONE NUMBER _____

FAX NUMBER _____ CELL PHONE _____

E-MAIL ADDRESS _____

Note: Mission volunteers are highly encouraged to provide an e-mail address for timely notification of ministry news, changes, etc.

MARITAL STATUS: Single Married Divorced Widowed YOUR OCCUPATION _____

IF MARRIED, NAME OF SPOUSE _____

SOCIAL SECURITY NUMBER _____

PASSPORT NUMBER _____ PLACE OF ISSUE OF PASSPORT _____

MONTH/DAY/YEAR PASSPORT EXPIRES _____

If you do not have a passport for international travel, you MUST apply for one as soon as possible in order to possess a valid passport in time for the trip and trip preparation. Take action NOW to get one. If you have a passport, the expiration date must be 12 months after return from the travel time.

HAVE YOU EVER BEEN ON A MISSION PROJECT? _____ If so, tell where and describe your most recent experience. _____

Signature _____ Date Signed ____/____/____

If you are not a member of RBBC:

CHURCH RECOMMENDATION: The _____ Church wholeheartedly recommends the applicant to Red Bank Baptist Church as sound in his/her faith and spiritually equipped to serve on this volunteer project.

Signature of Pastor _____ Date Signed _____

HEALTH HISTORY

YOUR NAME _____

NAME OF PERSONAL PHYSICIAN _____ PHONE _____

YOUR BLOOD TYPE _____ CAN YOU DONATE BLOOD? _____ YES _____ NO

PLEASE LIST ANY MEDICAL PROBLEMS _____

PREVIOUS OPERATIONS OR SERIOUS ILLNESSES (Also list dates) _____

CURRENT MEDICATIONS (List) _____

SPECIAL DIET (Describe) _____

NAME OF YOUR DENTIST _____ PHONE _____

HAVE YOU HAD? Please circle

- | | |
|--|--|
| 1) FULL HEPATITIS B IMMUNIZATION SERIES | YES OR NO |
| 2) TETANUS BOOSTER IN LAST 5 TO 10 YEARS? | YES OR NO If yes, please give date _____ |
| 3) HEPATITIS A VACCINE? | YES OR NO |
| 4) FULL POLIO VACCINATION SERIES? | YES OR NO |
| 5) MEASLES, MUMPS, RUBELLA & CHICKEN POX VACCINES? | YES OR NO |
| 6) TYPHOID VACCINE? | YES OR NO |
| 7) CHOLERA VACCINE? | YES OR NO |

HEALTH INSURANCE

NAME OF INSURANCE COMPANY _____

ADDRESS _____

PHONE NUMBER OF INSURANCE COMPANY _____

THIS POLICY IS ISSUED IN THE NAME OF _____

ADDRESS _____

IF GROUP POLICY, PLEASE LIST EMPLOYER _____

EMPLOYER PHONE NUMBER _____

Be sure to attach a legible copy of your health insurance card (front and back) and verify the information submitted above.

ANY OTHER PERTINENT HEALTH INFORMATION (Please describe) _____

EMERGENCY CONTACTS

NAME _____ RELATIONSHIP TO YOU _____

ADDRESS _____

DAY PHONE _____ NIGHT PHONE _____

NAME _____ RELATIONSHIP TO YOU _____

ADDRESS _____

DAY PHONE _____ NIGHT PHONE _____

COVENANT

I covenant to make spiritual and physical preparation for this mission trip, to read carefully any orientation material given to me, to faithfully attend all team meetings when called and to seek the heart of a servant as I serve our Lord on this trip. My covenant, in word and deed, will honor the Lord Jesus Christ. I will employ my skills, talents and spiritual gifts in the building of the Kingdom of God in the place where I serve. I will refrain from using alcohol or tobacco in any form while on this trip.

Signature _____ Date Signed ____ / ____ / ____

RBBC MISSIONS PROJECT VOLUNTEER RELEASE AND COVENANT NOT TO SUE

WHEREAS, the undersigned will be traveling and participating in various mission projects which are sponsored in whole or in part by RED BANK BAPTIST CHURCH; and

WHEREAS, the undersigned desires to release and hold harmless RED BANK BAPTIST CHURCH, its directors, officers, administrators, employees, members, team leaders, or team coordinators, and/or team members from any and all liability, claims, demands, or action which may occur as a result of any injury, whether accidental or otherwise, illness or other loss which the undersigned may sustain as a result, directly or indirectly, while participating in any of said mission projects and/or activities, or while traveling to, from, and during said mission project by any mode of transportation;

NOW, THEREFORE, in consideration of the participation by the undersigned in said mission projects and the benefits flowing from RED BANK BAPTIST CHURCH as sponsor and coordinator, and other good and valuable considerations, the undersigned does hereby release, discharge, and save harmless RED BANK BAPTIST CHURCH, and their directors, officers, members, administrators, employees, members, team leaders or team coordinators and/or team members from any and all liability, claims, demands, or actions which may occur as a result of any injury, whether accidental or otherwise, illness or other loss which the undersigned may sustain as a result, directly or indirectly, while participating in any of said mission projects and activities, or participating in any and all types of activities, while in any country, or while traveling to and from said countries, to and from mission project sites, or any other traveling by the undersigned from departure from any airport in the United States until the time of return to any airport in the United States by any mode of transportation.

The undersigned further agrees that he/she will not institute any action or suit at law, or in equity, against RED BANK BAPTIST CHURCH, their directors, officers, members, administrators, employees, team leaders or team coordinators and/or any team members at any time, and will not institute, prosecute, or in any way aid in the damages, cost, loss of services, expenses, or compensation for or on account of any alleged damage, loss, injury, health problem, disease or illness to any person or property, or both, whether developed or undeveloped, known, unknown, past, present or future resulting from the undersigned's participation in mission projects sponsored by RED BANK BAPTIST CHURCH.

The undersigned further acknowledges that he/she has been fully advised of the hazards, conditions, and environment existing in said countries in which the mission projects will be conducted and of various health and safety hazards which exist, and he/she fully understands and assumes all risks involved in participation on said mission projects.

This release shall be binding on all the heirs at law, beneficiaries, or any party in interest of the undersigned and shall inure to the benefit of any successor officers, directors, administrators, members, employees, team leaders or team coordinators, and/or team members of RED BANK BAPTIST CHURCH.

By signing this document I acknowledge that my photograph and/or statements may be used in any fashion by RED BANK BAPTIST CHURCH, in its sole discretion, including but not limited to, publications, videos and websites.

Do not use my photograph

Signature _____

Date Signed ____ / ____ / ____

FOR MINORS ONLY

NOTE: IF THE VOLUNTEER NAMED IN THIS APPLICATION IS UNDER THE AGE OF 18, THE FOLLOWING FORM MUST BE SIGNED BY THE MINOR AND BOTH PARENTS OR GUARDIANS OR IF A MARRIED MINOR, BY THEIR SPOUSE ON THE LINES BELOW.

Signature of Minor: _____

Signature of Minor's Parent or Guardian: _____

Signature of Minor's Parent or Guardian: _____

If Married, Signature of Minor's Spouse: _____

STATE OF TENNESSEE)
COUNTY OF HAMILTON)

I, _____, the undersigned, a Notary Public in and for said County and State, hereby certify that _____ who are known to me, acknowledged before me on this day that, being informed of the contents of said instrument, they executed the same voluntarily.

NOTARY PUBLIC

My Commission Expires: _____

**RBBC MISSIONS PROJECT VOLUNTEER
AUTHORIZATION FORM FOR PERSONS
UNDER 18 YEARS**

NOTE: IF VOLUNTEER IS UNDER THE AGE OF 18, THE FOLLOWING FORM MUST BE COMPLETED AND SIGNED BY BOTH PARENTS OR GUARDIANS.

I (We) authorize:

Full Legal Name of Minor: _____

Date of Birth _____ Place of Birth: _____

To travel on any occasion to (country or territory) _____

As well as to the country of residence, unaccompanied or under the responsibility of:

Name of Accompanying Adult on Trip: _____

Nationality _____ Marital Status _____ Profession _____

Full Address _____

Passport Number _____ Place of Issue _____

By signing this document, I acknowledge that my child's photograph and/or statements may be used in any fashion, by Red Bank Baptist Church, in its sole discretion, including but not limited to, publications, videos and websites.

Do not use my child's photograph.

BOTH PARENTS MUST SIGN EVEN IF ONE OF THEM IS GOING ON THE TRIP.
SIGNATURES MUST BE NOTARIZED.

Print Name _____ Relationship to Child: _____

Signature _____ Date _____

Print Name _____ Relationship to Child: _____

Signature _____ Date _____

STATE OF TENNESSEE)
COUNTY OF HAMILTON)

I, _____, the undersigned, a Notary Public in and for said County and State, hereby certify that _____ and _____ who are known to me, acknowledged before me on this day that, being informed of the contents of said instrument, they executed the same voluntarily.

NOTARY PUBLIC

My Commission Expires: _____

CHECKLIST

Please attach the following to your application:

- Copy of your medical insurance card.
- Copy of your passport (photo id page).
- Photograph – passport size.
- Deposit
- Testimony
- If a minor, a completed authorization form for persons under 18 years.