

Applicationform Participant

Dear Participant!

We are happy that you have chosen to come to one of our mission programs. We are convinced that what you experience this summer will change your life.

Please, fill out the following forms carefully and send it to us as soon as possible.

Your application is complete when the following documents have reached us and, after you have received a notification that you have been accepted, you have paid the fee for your particular program:

- Applicationform
- Reference by your pastor, a member of your church council or by your youth leader (available as a download on www.gospeltribe.de).

We will contact you as soon as we have received all documents and we have decided whether to accept you for the program. Please, transfer the mission fee only after you have received your confirmation of participation.

Address:

GOSPELTRIBE e.V.

Bahnhofstrasse 11

76351 Linkenheim

Germany

info@gospeltribe.de

Bank account:

(Our bank account will be available as of the beginning of February and we will inform you when the participation fees can be transferred.)

We are looking forward to meeting you!! ☺

Your GOSPELTRIBE Leadership team

Mission (please answer relevant questions)

Herewith I apply for the mission _____, at the following dates _____.

I would like to be in the same team with the following people (as far as possible).

Are you a member of a youth-/student group taking part in this mission? If yes, which group do you belong to?

Is your youth leader taking part in the summer mission? If yes, what is his / her name?

Personal Information:

Name:

(bitte aktuelles Foto einfügen)

Date of Birth: _____

Address: _____

Phone number: _____

Mobile: _____

Email address: _____

Nationality: _____

Passportnumber: _____ Valid till: _____

Married / Engaged / Single / Divorced

Name of Parents / Guardian?

To be contacted in case of an emergency:

Name: _____

Address: _____

Phone number: _____

Medical Information

Do you suffer from any disease, allergy or handicap?

Who is your GP? (please, provide address)

Do you need to take medication? If yes, what exactly and how often?

Is there anything else we need to know concerning your health?

What vaccinations do you have?

Church membership

Name of your church: _____

Denomination: _____

Name of pastor: _____ Phone number: _____

How long have you been going to this church? _____

Are you active in your church? If yes, in what areas?

School, profession and other skills (only answer relevant questions)

Do you still go to school? What year?

If you are a student, what do you study?

What is your profession?

Who is your employer?

What languages do you speak? On a scale of 1-4 (1 basic, 2 good, 3 fluent, 4 mother tongue) how well do you know the language?

Do you have a drivers-licence? Which one?

Do you play an instrument? Which one and how well?



Relationship with God

Please describe how you came to know Jesus, why you follow him and what he means to you.

Lined writing area with 30 horizontal lines for text entry.



Describe on half a page why you would like to join this program.

Describe an experience with God which formed you in a special way.

What do you believe God thinks about you?

What is positive about your relationship with God and what would you like to change?

Mission-experience

Have you been on a mission before? When and where?

If you have been on previous missions, what did you like and what not?

When you talk to people about Jesus you experience it as:

- | | | |
|---|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> awful | <input type="checkbox"/> I enjoy it | <input type="checkbox"/> I am afraid |
| <input type="checkbox"/> I haven't ever done that | <input type="checkbox"/> natural | <input type="checkbox"/> frustrating |

Self-image (several answers are possible)

What are your three biggest strengths?

- (1) _____ (2) _____ (3) _____

What are your three biggest weaknesses?

- (1) _____ (2) _____ (3) _____

How do you react, when a person in authority (parents, boss, etc) ask you to do something you do not like to do? Generally...

- | | |
|---|--|
| <input type="checkbox"/> I complain, but I do it anyway | <input type="checkbox"/> I do it without complaint |
| <input type="checkbox"/> I complain and don't do it | <input type="checkbox"/> I start negotiating |

How do you react under stress or when you did not get enough sleep?

- | | |
|--|--|
| <input type="checkbox"/> I keep cool | <input type="checkbox"/> I retreat within myself |
| <input type="checkbox"/> I become annoying | <input type="checkbox"/> I become irritated soon |

How do you react when someone hurts you?

- | | |
|--|--|
| <input type="checkbox"/> I talk to this person | <input type="checkbox"/> I tell this person what I think about him/her |
| <input type="checkbox"/> I retreat within myself | <input type="checkbox"/> I talk about this person behind his/her back |

I am rather:

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> friendly | <input type="checkbox"/> confronting | <input type="checkbox"/> often in the centre of attention |
| <input type="checkbox"/> quiet | <input type="checkbox"/> shy | <input type="checkbox"/> impulsive |
| <input type="checkbox"/> make new friends quickly | <input type="checkbox"/> withdrawn | <input type="checkbox"/> stable |
| <input type="checkbox"/> take initiative | <input type="checkbox"/> passive | <input type="checkbox"/> helpful |
| <input type="checkbox"/> I become annoyed quickly | <input type="checkbox"/> patient | <input type="checkbox"/> dependable |

When I am given an assignment

- I immediately and faithfully complete it
- I complete the assignment but take some time to start on it
- often I do not complete the assignment.
- I try to complete the assignment better than I was asked to.

Volunteer

If there is a need, I would like to help in the following areas:

- | | | |
|---|--|--|
| <input type="checkbox"/> dancing | <input type="checkbox"/> leading a small group | <input type="checkbox"/> music |
| <input type="checkbox"/> mime | <input type="checkbox"/> short sermons | <input type="checkbox"/> devotions |
| <input type="checkbox"/> technical | <input type="checkbox"/> counselling | <input type="checkbox"/> make pictures |
| <input type="checkbox"/> praying for others | <input type="checkbox"/> filming | <input type="checkbox"/> decoration |
| <input type="checkbox"/> cooking | <input type="checkbox"/> prayer | |

Other: _____

I think I can take on shared responsibility in the following areas (e.g. dancing, drama, cooking, etc...)

Have you led a small group before? If yes, when and where?

Can you imagine taking on shared responsibility for a small group of young teens?

- yes no



Rules of conduct

We are convinced that participating in this mission program will change your life and that God wants to use you in a very special way. We are praying for you from the day of your application and we want to support you and encourage you in your gifts and skills as well as we can. As this mission should be a very special time for you, we have some rules that we think are necessary in order to make sure that the mission is a success for you, for your team and especially for the people we want to serve. Please, obey the following rules.

1. It is possible, that there will be times in this mission in which you do not agree with your leader about certain decisions and will look at situations in a different way. We want to ask you to follow the directions of your leader in such situations. In general your leader will have more experience and will have good reasons for deciding in a way. Also, your leaders are only people and can make mistakes. More important than always making the right decisions however, is that the mission team is a unity.
2. During the mission, we ask you not to enter into any relationships with people of the opposite sex. Should you fall in love, we ask you to keep this to yourself during your time with us and also not to show this in your behaviour. If you already have a relationship when you come to the mission (and if you come together) we ask you to put your relationship back a bit for the duration of the mission and to invest yourself in your team instead. Among other things we mean relinquishing physical contact (holding hands, kissing, etc.) and time alone together. We think it is important that all participants are able to concentrate on God and we do not want to awaken desires which are good and natural but deviate from the goal of your time with us.
3. Drugs, alcohol and cigarettes are a definite no during your time with us.
4. There is nothing which can destroy the atmosphere of a mission in such a way as to gossip or slander about leaders and co-participants. Please, do not do this!

Should you break any of these rules, we reserve the right to release you of your responsibilities and to send you home if necessary. You will need to pay for going home yourself in this case.

Declaration of consent

I, _____ herewith agree, to subordinate myself to the overall leadership of the mission and to cooperate with the people in authority of the mission, the organisation or church with whom we cooperate and to take their directions and recommendations seriously during the time of our mission, even if I do not understand them or do not agree with them. I am aware that I can be sent home if I do not follow directions. Furthermore, I pledge not to start a relationship during the time of the mission and should I already have a relationship at the time of the mission, not to leave the group together and to leave any physical contact be for the time of the mission programme.

Participant

Date

Declaration of consent by parent or guardian of participant / Adult participant

I hereby give permission for my child to take part in the mission program in from.....to.....

- 1. I hereby ...(do not)... allow my child to go into the town /city where the mission program takes place in a group of at least three persons after having previously received permission to go out from the leadership team.
- 2. My child can (not) swim and is (not) allowed to go swimming in a swimming pool or sea. *(please delete "NOT" where applicable!!!)*

When in case of an emergency I cannot be reached, I hereby give permission to the physician selected by the staff to hospitalize, secure proper treatment for, and to order necessary injections, anaesthesia, surgery or any other medical treatment as deemed necessary for my child. I release and waive any right to sue. I also agree to defend and indemnify Gospeltribe, its employees, and volunteers against any claim or action that might arise on behalf of myself or my child, other than the wilful or reckless misconduct of Gospeltribe, its employees, or volunteers.

I am aware that, in case my child does not accept or obey direct orders by the Staff of Gospeltribe he /she can be sent home immediately and I am financially responsible myself in this case.

Parent / Guardian
Adult Participant

Date