



Dear Missionary,

I am excited that you are starting the process of 'Going On A Journey.' I pray that you will hear God's calling for you to 'GO' into the world and take the Gospel to 'Tampa and Beyond...'

I cannot tell you what 'Going On A Journey' will do to your life, whether this is your first or one of many that you have done in the past. I promise you God will grow you and transform you in a special way.

In the Book of Isaiah, the Lord said to Isaiah, "Whom shall I **send**? And who will go for us?" And Isaiah responded, "Here am I. **Send me!**" I pray that you will be able to respond like Isaiah, "Here am I. **Send me!**" When you say yes to God, I promise you that you will embark on the 'Greatest Adventure On Earth,' and you will see God work in the lives of the people you will minister to, as well as in your own life.

Please read the contents of this packet and keep it with you throughout the team preparation time. It will answer many of the questions you may have. After you select your 'Journey,' the team leader will provide you with more detailed information.

I thank you for considering to 'GO' and we look forward to hearing from you on
'What God is doing in the Mission field!'

Fixing my eyes on Him,

Ray Sanabria
Minister of Missions
Idlewild Baptist Church

Walk in wisdom toward them that are without, redeeming the time.

Colossians 4:5

How Do I Get Started?

YOUR 10 STEP GUIDE TO GOING

1. PRAY

The Holy Spirit will lead you in this process. He may reveal only one step at a time, but God will be faithful to lead you.

2. GET INFORMATION

Attend an information meeting or call the contact person for that trip. Most of our trips are lead by qualified and trained volunteer leaders. They will give you the details of dates, costs, and the trip project.

3. FILL OUT THE MISSION TRIP APPLICATION

We want you to succeed and the trip to be effective. Your application will provide key information to your team leader to get to know you and better understand the dynamics of the team.

4. GET YOUR PASSPORT

Start on the process now. Even if you are unsure of what trip you are to go on, get your passport. Download a passport application off the internet or obtain an application at the passport window at your local Post Office. Many countries will require a visa in addition to your passport. It would be a timesaver to get 2 additional pictures when you are getting your passport pictures.

5. ATTEND THE MISSIONS TRAINING AND EVANGELISM CLASSES

These CLASSES will encourage and strengthen your spiritual growth. They are a necessary preparation for any mission trip.

6. ATTEND YOUR TRAINING MEETINGS

Each team will go through pre-trip training. Your participation is vital for your own preparation as well as for building team unity.

7. DECIDE TO GO

Give your Trip Team Leader the deposit amount necessary to make travel arrangements. During the training meetings, you will be asked to sign a Team Trip Covenant outlining commitments of the team for personal growth, lifestyle guidelines, teamwork, and project commitment.

8. SEEK SUPPORT

Talk with your small group and close friends about this opportunity. Their emotional, prayer, and financial support of you is a necessary part of this process.

9. GO!

10. COME HOME & SHARE

Your stories and enthusiasm will be the instrument God uses to encourage another to GO. Send a follow-up report to all those you asked to support in prayer and finances.

INSTRUCTIONS FOR FILLING OUT JOURNEY APPLICATION

- The Missions Office uses this application form for all mission journeys-home and foreign. Once it is filled out it is kept in the Missions Office. **We do not require that you do additional ones for future trips unless your information changes** such as a name change, passport renewal or addition, beneficiary change, etc.
- Please fill out each page completely.
- Do not omit any pages from the information packet.
- Be sure to include a copy of your insurance card as well as medical information and release to be treated.
- If you have an application on file please fill in the separate medical information form in the packet if there has been a changed from the last application you filled.
- Be sure your passport copy is clear and legible. These are used for purposes of identification should problems arise in a foreign country or you should lose your passport. The picture must, therefore, be clear enough to identify you.
- If children are accompanying you on the trip, you must fill out an application for them as well. Treat them as separate applications-do not attach them to the parent application.
- On foreign journeys, always put a copy of the photo page of your passport in every piece of luggage that you take.

MISSION JOURNEY PARTICIPATION AGREEMENT

PARTICIPANT PERSONAL INFORMATION

Name of participant: _____ Gender: () Male () Female
Address: _____ Telephone: _____
Email _____
Date of Birth _____ Citizenship _____ Country of Birth _____
Marital Status: () Single () Married () Separated () Divorced () Engaged () Widowed () Annulled () Divorced & Remarried
Spouse's Name _____ Is your spouse supportive of your participation in this project? _____
* Please attach Spousal Support Acknowledgment Form signed by your husband/wife.
Names & Ages of Children _____
Name as It Appears on Passport _____ *If applied for please write your name as it will appear in passport
Passport Number _____ Expiration Date _____ City and State Where Issued _____
Missions experience: _____

JOURNEY INFORMATION

Sponsoring organization: **Idlewild Baptist Church, PO Box 44, Lutz, FL 33548-0044**
Project's location and dates: _____ Team Leader: _____
Purpose of the trip: _____ Cost: _____
If your team orders T-Shirts, what size would you desire? _____

PARTICIPANT MEDICAL INFORMATION

Is sponsor authorized to approve medical treatment? () Yes () No
Is participant covered by personal/family medical insurance? () Yes () No
If yes, name the insurer: _____ Policy or group number: _____
*Please attach a copy of your insurance card.
How would you describe your present health? () Excellent () Good () Average () Poor
Please state any major illness (es) you have had in the last five years _____
Are you presently under the care of a physician? () Yes () No If yes, please explain _____
Please list any medication you are taking _____
Please list any allergies you have _____
Please explain any physical challenges that you may face on this ministry trip _____
Emergency contact: _____ Telephone: (day) _____ (night) _____

PARTICIPATION AGREEMENT

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

The participant also understands that the deposit is non-refundable and he/she will be responsible for airline tickets purchased in his/her names upon cancellation. The training meetings for this mission project are critical for the spiritual unity and physical preparation of the entire team. The participant commits to faithfully attend all meetings at the scheduled times.

Participant's Signature: _____ Date: _____

Parent/guardian if participant is a minor: _____
(name) (signature)

INVOLVEMENT

Church Membership: () Idlewild Baptist Church () Other Church _____

How long have you been a member? _____ List the ministries with which you have been involved at your church, including time of involvement with any leadership positions held _____

How would you describe your daily relationship with Jesus Christ? _____

List the ministries with which you have been involved outside of your church, including time of involvement with any leadership positions held _____

What are your spiritual gifts? _____

How can you use your spiritual gifts on this trip? _____

Have you had training in personal evangelism? Yes _____ No _____ Please explain _____

When was the last time you witnessed to someone? _____

Are you a current member of a Sunday School class? _____ Name of your teacher _____

How long have you been in that class? _____

Please list any responsibilities in SS leadership you have? _____

Has your SS class adopted any people group? _____ Which one? _____

Have you been on a short term missions project? _____ If so, describe your experience _____

TESTIMONY

How was your life before coming to Jesus? (What got me interested in God?)

How and when did you come to know Jesus as my Savior?

How is your life now that you know Him?

In what areas of your life have you seen spiritual growth over the last month, year and 3 years?

Briefly describe why do you see God calling you to participate on this trip.

What talents do you have that would like to use on this trip?

What do you see as your role on this ministry team?

PACKING TIPS

- 1) Pack light! You will have to carry what you pack. Because we will be taking extra weight with tracts, Bibles, equipment, etc. only one piece of checked luggage is allowed. **Your bag must be less than 50 pounds.** You will also be permitted to have one carry on bag (regulation size to fit under the seat)
- 2) Tightly secure with tape any items that may come open while traveling.
- 3) Take luggage you don't mind having damaged.
- 4) Carry one change of clothes and some toiletries (allowed) with you in your carry-on luggage. Sometimes luggage is lost and or/delayed.
- 5) Take items you won't mind leaving behind if you see a need.
- 6) Leave room for souvenirs.
- 7) If you are taking a camera, pack enough batteries. These are costly in most places and difficult to find in a remote locale.

Don't Forget:

Bible
Camera (with batteries and film if not digital)
Handy wipes, hand cleaner
Battery operated alarm clock
Toiletries: Shampoo, shaving items, toothbrush, toothpaste and floss, tissue packets
2 towels and washcloths (if not staying in a hotel)
Raincoat or umbrella (optional)
Snack foods or money for snacks
Spending money in small bills
Toilet paper (2 rolls)
Check the electricity, if 220 V you will need a 110V. to 220V. transformer (go to radio shack)
A water bottle
Travel sickness medicine

Gift Ideas to Share With Your Hosts

For Children:

Baseball caps for boys	Jigsaw puzzles and games
Hair barrettes and necklaces for girls	Stickers
Socks	T-shirts
Pencils and pencil sharpeners	

For House Parents, Pastors and Families, Village Churches, Orphanage Staff

Coffee	Hair Brushes
Stationary	Pens
Calculators (solar, if possible)	Toiletries
Chocolate bars / candy	

Idlewild Adult Medical Release
For Completion by all participants age 18 or older

Name: _____ Emergency Contact: _____

Relationship: _____ Phone(s): _____

Insurance Information

Company: _____ Policy type: _____

Phone: _____ Policy #: _____

Project (other than U.S.) participants **must have insurance coverage outside the U.S.**

Medical Information

List all prescription medication(s) you will bring on the project: _____

For what condition (s)? _____

Date of last tetanus shot (this must be within ten years): _____

Date of Hepatitis A inoculation (this is **not** required, but recommended): _____

List any physical disabilities or limitations: _____

List any known allergies and reactions: _____

List any major illnesses in the past year: _____

Have you fainted or passed out? _____ When? _____ Why? _____

Do you have any eating disorders? _____ If yes, have you ever received counseling? _____

For Completion by Physician

(If you are under the care of a physician for any condition or medication, have him/her complete the following):

I have examined _____ and find him/her to be in good general health and physically able to take part in the AIM project to _____ on (date) _____ to _____.

Doctor's signature : _____ Date: _____

Release

In case of unconsciousness, or inability to release myself for medical treatment resulting from illness, injury, or an accident which requires medical attention, I _____, give my permission to _____, its representatives and all attending health care professionals (defined as including, but not limited to registered nurses, licensed practicing nurses, physicians 'assistants, doctors and paramedics) to receive medical treatment, to hospitalize, anesthetize, or perform surgery on me as is required. I, _____, the undersigned, do release, acquit, discharge and covenant to hold harmless _____, and its representatives from all actions, damages or liabilities arising out of the treatment of any illness, injury, or accident incurred during my participation on the trip. It is the intention of this release that the above _____s and its representatives incur no liability whatsoever while attempting to meet all medical needs that I may require during the project.

Participant Signature: _____ **Date:** _____

State of _____, County of _____ . Sworn to and subscribed to me this _____ day of _____, 200 _____.

Notary Public signature: _____ My commission expires: _____

Youth Medical Release
For completion by the parents of all participants under the age of 18

Parent Name: _____ Parent Home Phone: _____

Parent Work Phone: _____ Parent Cell Phone: _____

Emergency Contact Other Than Parent: _____ Relationship: _____

Emergency Contact Daytime Phone: _____ Evening Phone: _____

Insurance Information

Company: _____ Policy type: _____

Phone: _____ Policy #: _____

Project (other than U.S.) participants **must have insurance coverage outside the U.S.**

Medical Information

List all prescription medication(s) you will bring on the project: _____

For what condition(s)? _____

Date of last tetanus shot (this must be within ten years): _____

Date of Hepatitis A inoculation (this is **not** required, but recommended): _____

List any physical disabilities or limitations: _____

List any known allergies and reactions: _____

List any major illnesses in the past year: _____

Have you fainted or passed out? _____ When? _____ Why? _____

Do you have any eating disorders? _____ If yes, have you ever received counseling? _____

For Completion by Physician

I have examined _____ and find him/her to be in good general health and physically able to take part in the AIM project to _____ on (date) _____ to _____.

Doctor's signature : _____ Date: _____

Parental Release

In an emergency, illness, injury, or accident which requires medical attention, I give my permission to _____, its representatives and all attending health care professionals (defined as including, but not limited to registered nurses, licensed practicing nurses, physician's assistants, doctors and paramedics) for my child, _____ to receive medical treatment, to hospitalize, anesthetize, or perform surgery. I understand that every effort will be made to contact me before these actions are taken. I, _____, the undersigned, do release, acquit, discharge and covenant to hold harmless _____, and its representatives from all actions, damages or liabilities arising out of the treatment of any illness, injury, or accident incurred during my child's participation on the trip. It is the intention of this release that the above _____s and its representatives incur no liability whatsoever while attempting to meet all medical needs that my child may require during the project.

Parent Signature: _____ **Date:** _____

State of _____, County of _____. Sworn to and subscribed to me this _____ day of _____, 200____.

Notary Public signature: _____ My commission expires: _____

Idlewild Liability Form

I, _____ in consideration of my acceptance as a participant on a
(Name)
Mission trip sponsored by _____ to _____
(Destination of Trip)

represent and agree that:

1. I am a participant and I am/am not an employee of Idlewild Baptist Church.
(circle one)

2. I am aware of the potential hazards and risks to my person and property associated with serving in a missions capacity, such hazards and risks including, but not being limited to, injury or death by accident or intent, disease, war, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity and acts. I choose to go on this trip with full awareness of these risks and I will rely upon any insurance coverage that may be available to me from any other source. I do this recognizing that Idlewild Baptist Church might not be able to offer the opportunity for missions service such as this without a release such as this. With respect to Idlewild Baptist Church and its agents, officers, volunteers, directors, and employees, I voluntarily assume all risks of death, injury, illness or loss associated with such risks, and any damage to my personal property, and I release Idlewild Baptist Church and its agents, officers, directors, and employees from any liability that I may suffer or claims I may have as a result of participation in the missions project even if resulting from the negligence of Idlewild Baptist Church, its agents, officers, volunteers, directors, and employees. I further recognize that such risks have always been associated with missionary service. (2 Corinthians 11:23-28.)

3. I attest and certify that I have no medical conditions that would prevent me from performing my duties.

4. I expressly waive any defense to the enforcement of any provision of this commitment arising from a claim of lack of consideration and warrant that this commitment constitutes a legal, valid, and binding obligation upon me enforceable against me in accordance with its terms. I am going on this trip at least in part for the spiritual blessing of serving as God asks.

5. I further understand that Idlewild Baptist Church does not have or offer any insurance coverage that would apply in the event of my illness, injury or death, or damage to my property that may occur during my participation on the trip, and that if I desire insurance coverage I am responsible for the cost and arrangements for such insurance.

6. I expressly agree that this assumption of risk agreement is intended to be as broad and inclusive as permitted by law. I further state that I HAVE CAREFULLY READ THE FOREGOING ASSUMPTION OF RISK AND UNDERSTAND ITS CONTENTS, AND I VOLUNTARILY SIGN THIS RELEASE AS MY OWN FREE ACT. THIS IS A LEGAL DOCUMENT. I UNDERSTAND THAT I HAVE THE OPPORTUNITY TO CONSULT WITH AN ATTORNEY BEFORE SIGNING IT.

Signature: _____ Date: _____

State of _____, County of _____. Sworn to and
subscribed to me this _____ day of _____, 201 ____.

Notary Public signature: _____ My commission expires: _____

Parental Permission and Liability
NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF IDLEWILD BAPTIST CHURCH AND ITS EMPLOYEES AND VOLUNTEERS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM IDLEWILD BAPTIST CHURCH OR ANY OF ITS EMPLOYEES, AGENTS OR VOLUNTEERS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND IDLEWILD BAPTIST CHURCH HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

I, _____, and _____ on behalf of our child _____
(Name of parent/guardian) (Name of parent/guardian) (Name of the minor)
for whom we are legal guardians, accept the conditions and risks outlined in this release and consent to his or her or their participation on a mission trip sponsored by Idlewild Baptist Church to _____ and we represent and agree that: (Destination of trip)

1. We are legally responsible for the above identified minor (participant) and said minor is/is not an employee of Idlewild Baptist Church (circle one)
2. We are aware of the potential hazards and risks to the participant and property associated with serving in a missions capacity, such hazards and risks including, but not being limited to, injury or death by accident or intent, disease, war, terrorist acts, weather conditions, inadequate medical services and supplies, criminal activity and acts. We accept these risks on behalf of the participant and choose to allow the participant to go on this trip with full awareness of these risks and we will rely upon any insurance coverage that may be available to us from any other source. We do this recognizing that Idlewild Baptist Church might not be able to offer the opportunity for missions service such as this without a release such as this. With respect to Idlewild Baptist Church and its agents, officers, volunteers, directors, and employees, we both individually and on behalf of the participant voluntarily assume all risks of death, injury, illness or loss associated with such risks, and any damage to our personal property, and we release Idlewild Baptist Church and its agents, officers, directors, and employees from any liability that I may suffer or claims we may have as a result of participation in the missions project even if resulting from the negligence of Idlewild Baptist Church, its agents, officers, volunteers, directors, and employees. We further acknowledge that such risks have always been associated with missionary service. (2 Corinthians 11:23-28)
3. We attest and certify that the participant has no known medical conditions that would prevent our child from participating, and provide further assurance of this with a separate Medical Release Form, signed by a medical doctor.
4. We expressly waive, on behalf of the participant, any defense to the enforcement of any provision of this commitment arising from a claim of lack of consideration and warrant that this commitment constitutes a legal, valid, and binding obligation upon me and the participant enforceable against us and our child in accordance with its terms. We am allowing our child or ward to go on this trip at least in part for the spiritual blessing of serving as God asks.

5. We further understand that Idlewild Baptist Church does not have or offer any insurance coverage that would apply in the event of the participant's illness, injury or death, or damage to his or her or our property that may occur during participation on the trip, and that if we desire insurance coverage we are responsible for the cost and arrangements for such insurance.

6. We expressly agree that this assumption of risk agreement is intended to be as broad and inclusive as permitted by law. We further state that WE HAVE CAREFULLY READ THE FOREGOING ASSUMPTION OF RISK AND UNDERSTAND ITS CONTENTS, AND WE VOLUNTARILY SIGN THIS RELEASE AS OUR OWN FREE ACT. THIS IS A LEGAL DOCUMENT. WE UNDERSTAND THAT WE HAVE THE OPPORTUNITY TO CONSULT WITH AN ATTORNEY BEFORE SIGNING IT.

Father's signature: _____ Date: _____

State of _____, County of _____. Sworn to and subscribed to me this _____ day of _____, 201 ____.

Notary Public signature: _____ My commission expires: _____

Mother's signature: _____ Date: _____

State of _____, County of _____. Sworn to and subscribed to me this _____ day of _____, 201 ____.

Notary Public signature: _____ My commission expires: _____

Passport Procedures

RENEWING YOUR PASSPORT

Enclose the following items and mail to:

Mellon Bank
ATTN: Passport Supervisor 3719-71
3 Mellon Bank Center, Room 1532723
Pittsburgh, PA 15259-0001

Applicant must submit the following:

Current passport

The issue date must be within the past 12 years

Passport must have been issued on or after 16th birthday

2 passport photos

dimension 2" x 2", these can be taken at the passport office for \$ 7.00 or other photo shops

\$7.00 check or money order (cash not accepted)

does not include the cost of passport photos

the passport is good for 10 more years

A valid photo identification is required if you go into the passport office

You may not apply by mail if:

Your old passport was issued more than 12 years ago

If you were a minor on your old passport

Photos, \$7 fee, and your current passport should be placed in a sealed envelope and mailed to the official passport office. You should receive your new passport within a maximum of 25 business days of receipt of completed application. To expedite, send an additional \$7 by next day mail both ways.

Once you receive your passport:

After receiving your passport from the US Passport Office, place it in a safe location. In some cases, you may be required to turn in your passport to the Idlewild Baptist Church Missions Department. The Missions Department will handle your visas for you, if necessary, after you turn in the appropriate forms.

Passport Procedures

APPLICATION FOR NEW PASSPORT

You can pick up a Passport Application at a local Post Office. It can take 6-8 weeks to receive your passport, so it is vital that you begin working on your passport as soon as possible.

The applicant must appear before a local, designated passport acceptor (usually a postmaster or clerk of the court) for the signing and witnessing of the application. The closest designated acceptor to Idlewild Baptist Church is:

Carrollwood Post Office
14910 North Dale Mabry Highway
Tampa, FL
813-908-3478
www.travel.state.gov for more info

Monday-Friday - 8:00-3:00
1-800-275-8777

The applicant must submit the following:

2 Passport photos
dimension 2" x 2" (these can be taken at the post office or other photo shops)

\$?.00 cash or money order (checks not accepted) (US Government fee to be collected by the local post office)

For ages 16 and older (*under 16, \$?*)

Your passport will be valid for 10 years

State birth certificate

This must be State certified with a raised, embossed seal. A copy or hospital record of birth will not be accepted by the passport department

Photo identification is required

i.e.: Drivers License

Photos, \$? fee, state birth certificate and your completed application will be collected by your local passport acceptor and placed in a sealed envelope, which they will forward to your nearest official passport office. You should receive your passport and birth certificate within 25 business days of receipt of completed application. To expedite, pay an additional \$? for guaranteed processing within 3 business days. Send it next-day mail both ways.

Passport Inquires - 603-334-0500 or 1-800-688-9889

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Short - Term Mission Projects Policies

Idlewild Baptist Church

Financial Policy for short-term team members

- Team members are expected to raise 100% of their financial support for the trip. Funding will be completed by the due date set by the team leadership; **if you are a qualified IBC member you and need financial assistance with the cost of the Journey you need to fill a Application for Short Tem Missions Funding**
- Support shall be raised outside and within IBC using the methods taught in "Short-Term Mission Support Raising; The Team Building Approach"
- If the team member's financial support is channeled through Idlewild Baptist Church and he/she raises more than the required support or for any reason cannot participate on the trip, it is the preference of the Missions
- Department and team leadership to reallocate the funds within the team account. All funds must be used to support the field ministry to which it was given Candidates should make funding deposits through the Team
- Treasurer, who will also keep a record of each team member's contributions
Refunds are not provided.

Policies for Team Behavior and Attitude

Team members participating on IBC sponsored short-term trips are reminded that they are ambassadors of Jesus Christ (II Cor 5:20). As teams go overseas they not only represent Him but IBC, our Pastor, the United States and the supporting mission agency. This is a tremendous responsibility. For this reason, the Missions Department of Idlewild Baptist Church asks that each team member seek to be above reproach in his/her actions and attitudes.

- Team members must submit to the team leader's authority
- Due to the political instability and anti-American sentiment in various countries around the world, Idlewild Baptist Church asks that team members refrain from expressing political opinions while overseas
- Abstain from the consumption of alcoholic beverages or any use of tobacco or illegal drugs while on the trip
- The team member must adhere to the behavioral guidelines for each specific team set by the team leadership or missionary agency with a mind toward the culture to which the team is going. This will require a servant attitude toward all nationals and team members, as well as the willingness to learn from the host culture (I Cor 9:19-23a)

After consultation with the Missions Department, the Team leader reserves the right to ask a problem team member to return home if that team member's behavior is destructive to the team, the ministry, or the host community. Any additional cost incurred as a result of this action will be at the team member's expense.

Short - Term Missions Support Raising

The Team Building Approach

The following guidelines will help you in writing your support letter:

- There are three types of letters:
 - A letter sent out asking for prayer support only (if you are paying your own way)
 - A letter sent out asking for prayer and financial support
 - A letter sent out asking for project support (if you are paying your own way)
- Compose your own letter. It is unwise to copy from a sample letter. The last thing a donor wants to receive is four copies of the same letter with four different signatures. People prefer to read a personal letter.
- Include the following information in the letter:
 - 1) Information about the country/culture you are going to
 - 2) Information about the sending organization (the church) and the hosting organization (the agency or national church)
 - 3) Description of what the team will be doing (why the team is doing this particular project)
 - 4) The cost of the trip (the same for each individual team member)
 - 5) You may want to recommend a giving amount (\$25, \$50, \$100)
 - 6) Why you want to be involved on the trip (reasons for going that you feel strongest about)
 - 7) How God called you to go on this trip
 - 8) How you would like the reader to be involved (prayer, financial, both)
 - 9) All checks must be payable to Idlewild Baptist Church
 - 10) Mail the check to you (the team member)
 - 11) The date you need the money
- Include a response slip for them to send to you.
- Keep the letter brief (one page).
- Include an Idlewild Baptist Church designated policy slip with every letter.

Send the Letter

Mail the letter, response slip, Idlewild Baptist Church policy slip, and a self-addressed envelope to the list of potential supporters by the deadline set by the team leader. Idlewild Baptist Church does not supply postage, envelopes, or copies of letters.

Follow-up

It is the team member and team leader's responsibility to keep accurate records of who has supported them and at what amount. Please send all of your supporters a personal card or note for their gift, support or prayer. The Missions Department and team leader will do a church wide recap of the project after it is completed however, if you have supporters from outside of the church it is a good idea to get a copy of the recap flyer and distribute to them.

Short - Term Missions Support Raising

The Team Building Approach

Building a Support Team

Each individual team member will be responsible for developing his or her own support team.

The support team consists of:

- *Prayer Supporters
- *Encouragers
- *Financial Contributors

The concept is to develop a team, not just to raise funds. The most important need for the team member is for people to pray for him or her, before and during the project.

The Team

The idea of the team is to involve as many people in the mission experience as possible. The team:

- *is a ministry through you to the team (TEAM = goers + prayer support + senders)
- *is a means by which others can share in the blessings of the mission (Phil. 4:17)
- *is a Biblical approach (II Cor. 8:4)
- *is a means by which others become World Christians through giving

You should seek people that you want on your team, not those who you think will give money. Remember, if the prayer support is in place, everything else will fall into place.

Raising Support

If an individual cannot pay for their trip, the most effective proven method to raise individual support is to write a letter for distribution to friends, co-workers and church members. Professional fund-raisers for large organizations will tell you that people will give to people they know. Potential contributors are happy to have the opportunity to invest in someone they know ***personally*** or an endeavor they care about. God's Word promises us that He will supply our every need.

Prepare the Team List

Usually between 50 - 100 names not all Idlewild Baptist Church members (50% outside our church); Friends, relatives, Christian contacts, non-Christians that God may open a door to witness to through this process

Write the Letter

You are asking people to support the ministry of Idlewild Baptist Church. If you are asking for financial contributions, you are asking them to help with the cost that you will incur by conducting the ministry (transportation, meals while on the field, in-country housing, visa, travel insurance, etc.) A common testimony for team members is that while they were initially put off by the idea of sending support letters, the experience turned out to be a highlight of the entire trip.

(Continued On Next Page)

SAMPLE SUPPORT LETTER

Date

Name

Address

City, State, Zip

Dear _____ ,

An incredible opportunity to serve in Portugal at the Word of Life Bible Camp has touched my heart. There is an immediate need in Portugal. The Missions Department has a camp and retreat area to be used for Christian ministry. They desire to begin a summer camp for children in July. There are many structural problems, plumbing problems and unsafe conditions. For the first time in my life I have been called to provide a service for God's kingdom. Only our Father in heaven knows how many hearts and souls will be changed because of this ministry. I am honored to be asked to provide a small contribution to this ministry. Please join me and watch what God will do.

We will leave on Friday, July 6th if reservations permit and will return approximately 10 days later. The cost of the trip is \$1,500.00, which includes airfare ground transportation, meals, lodging, insurance and departure taxes.

I ask that you prayerfully consider being a part of this team through your prayers, encouragement and financial support. Whatever amount God leads you to give, it will be a great blessing to me and the people I minister to while in Portugal, Our money is due in by June 6th Please make your check payable to Idlewild Baptist Church and return in the envelope provided.

I am excited to see what God has in store for me personally. I am excited to see the ways that God will use me and each of you who join the team to spread the message of salvation to Portugal. I pray that I will grow stronger in seeking Gods' will for my life and that I will return changed forever to better serve.

Yours In Christ,

(Your Name)



(Please cut this slip and return in the envelope provided - Thank you!)

(Type Your Name Here)

_____ I will pray for you.

_____ I will financially support you with a gift of \$ _____. Checks payable to IBC.

***** (You Should Include A Self-Addressed, Stamped Envelope In Each Support Letter You Send)**

All contributions to Idlewild Baptist Church missions are non-refundable. To be tax deductible you must:

- 1) Make checks and money orders payable to Idlewild Baptist Church.
- 2) Enclose a note stating which project and/or individual you are supporting.
- 3) Non-members (of Idlewild Baptist Church) will receive acknowledgement from the church at least once a year in reference to any gift amount.
- 4) Mail the check to the individual you are supporting.



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Financial Support Application for Short Term Missions

Name _____ Date _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone # - Home (____) _____ Work (____) _____ Cell (____) _____

E-mail address _____

Member of Idlewild? ____ How Long? ____

Are you presently attending a Bible Fellowship Class? ____ Which Class? _____

Are you giving regularly to IBC? ____ Have you completed the missions training class? _____

Missions Journey you are requesting support for: _____ Dates of Journey _____

Name of the organization sponsoring this trip _____

Contact Person _____ Telephone # - (____) _____

If support is granted, whom do we make the check out to? _____

Address of where we should send the check? _____

Full cost of mission trip to volunteer above mentioned _____

Desired amount of support requested from Idlewild* _____

***FINANCIAL SUPPORT IS AVAILABLE UP TO 50% OF MISSION TRIP COST FOR IDLEWILD MEMBERS IN NEED OF ASSISTANCE. SUPPORT PROVIDED WILL BE BASED ON NEED AND FUNDS AVAILABLE IN THE IDLEWILD ON MISSIONS FUND.**

Idlewild Member Signature

Amount Approved

Missions Pastor Signature

Thank you for your willing heart and desire to spread the gospel of Jesus Christ.

**Please note: This form must be submitted
with your journey application package to your team leader.**