

Spotlight on Haiti

Dates: October 3-10, 2015

Location: Cap Haitian, Haiti & surrounding areas

Purpose: To provide Haitian missionaries and their workers assistance in Haitian Christian Ministry's medical clinic and other duties as assigned.

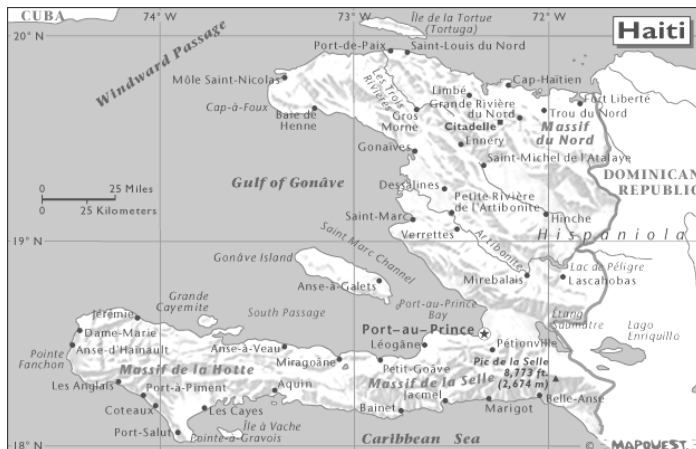
Cost: Approximately \$1,850 per person (\$100 non-refundable deposit due with application) on **March 1, 2015**. Make checks out to: **Crossroads Church**

Deadlines:	June 1, 2015	Next \$500 (\$600 total) Reference Letters due
	August 1, 2015	Next \$500 (\$1100 total) Passport received/copy turned in
	September 1, 2015	Final \$750 Balance Paid Authorization to leave country form

Please be aware that there are certain health risks associated with traveling to a tropical area of the world. For more information please visit the CDC website: www.cdc.gov/index.htm.

Recommended vaccines:

Vaccines will be discussed during our team meetings prior to departing for Haiti.



For more information, please contact Susie Cook at (574) 936-4797 or at E-Mail: cookieplymouth@yahoo.com



Touching the World Through Short Term Missions Trips



Haiti Mission Trip: October 3-10, 2015
Application Deadline: March 1, 2015

Crossroads Church
1650 North Oak Drive
Plymouth, IN 46563
Phone: (574) 935-3833



Catch the Vision!

As followers of Christ who have experienced the tremendous joy and satisfaction of knowing God thru faith in Jesus Christ, Crossroads Church is committed to sharing Jesus' message of forgiveness with all peoples of the world. We desire to be a source of light for those stranded in the darkness of sin, poverty, addiction and despair, whether in Plymouth, USA or in the most remote corner of the earth.

In 1984, Pastor Manno Laguerre and his wife, Prisca returned to their homeland in Haiti to begin the ministry God had laid on their hearts. Thus was born Haitian Christian Ministries in Pillatre, Haiti. We will have the opportunity to help Haitian Christian Ministries by working at the medical clinic on the property of HCM & demonstrating the love of Christ to those we serve at the clinic. We may also have opportunity to assist at the school and a local orphanage.

As Henry Blackaby has noted, *God invites his people to join Him where He is working*, and He is working mightily in Haiti. You will gain much more than you will give as we minister God's love to the people of Haiti!

This completed application is due March 1st to the Missions Team in the Crossroads Church office.



Part VI: Emergency Information/Liability Waiver

IN CASE OF EMERGENCY CONTACT:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Relationship to Applicant: _____

Home Phone: () _____ Work Phone: () _____

Cell Phone: () _____ Email: _____

LIABILITY RELEASE FORM

In being accepted and allowed to participate in Crossroads Church's activities associated with the trip to **Haiti**, I assume responsibility for my actions. I release Crossroads Church, its Elder Team, employees, and agents from any liability, loss, injury, illness or damage to myself or my property resulting from the trip to **Haiti**. Nothing contained herein shall excuse CEFC, its employees, or agents from responsibility to act with reasonable care for my safety or the safety of my property. In the event of an emergency, I hereby authorize an adult leader of this activity (affiliated with Crossroads), as my agent, to consent on my behalf to medical treatment. In this regard, I consent to allow that adult to authorize medical, dental or surgical diagnosis, X-ray examination & treatment including surgery and hospital care for me if needed, advised, and supervised by a licensed physician, surgeon or dentist.

Name of Applicant: (Please Print) _____

Signature of Applicant: _____ Date: _____

Part VII Insurance Form

Crossroads Church of Plymouth, IN will arrange for travel insurance, including limited health coverage, for all days of travel for this short-term trip. The cost of this insurance is included in the total trip amount.

Please turn in **this completed application with your two completed reference forms** and your **\$100 non-refundable deposit made out to Crossroads Church** no later than **Sunday, March 1, 2015** to the Church Office or mail to:

Haiti Mission Team
Crossroads Church
1650 North Oak Drive, Plymouth, IN 46563
Phone: (574) 935-3833

Part I: General Information

Last Name: _____ First Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Home Phone: () _____

Work Phone: () _____ Cell Phone: () _____

E-Mail: _____ Date of Birth: _____

Age: _____ Sex: _____ Marital Status: _____

Men's T-Shirt Size: S M L XL XXL XXXL (circle one)

Passport?: _____ Yes _____ No Name on passport: _____

Passport Number: _____ Date of Issuance: _____

Date of Expiration: _____ Country of Issuance: _____

Please attach a copy of the photo page of your passport if you have one. If you do not have a passport, please apply for one as it will take approximately 6 weeks to process. **This must be submitted by August 1, 2015**

Part II: Personal Information

#1) On a separate sheet of paper, please describe your personal relationship with Christ.

We'd love to hear what God is doing in your life right now?

#2) Do you have any building or construction experience? _____

#3) Do you have any training/background/certification in any medical profession (i.e., doctor, nurse, EMT, WSI, physical therapy, ENT, etc.)? If yes, please indicate specifics: _____

#4) Have you ever visited another country? ☐ Yes ☐ No

If yes, which country(ies) _____

#5) What cross-cultural experiences have you had? (ministry/business/background/educational)

#6) Do you give permission for Crossroads Church to use any group photos in which you may appear for the purposes of public relations and/or promotional materials? ☐ Yes ☐ No

Part III: References

Please list two people in the church (non-pastors) who know you and would serve as references for you (a CG leader, Youth Group leaders, etc.), and ask those people to completed the reference form (see enclosed).

Name _____ Phone: () _____

Name _____ Phone: () _____

Part IV: Language Proficiency and Ministry Skills

Obviously, in a cross-cultural environment, language skills are helpful. Please list any languages and use the following scale to rate your ability:

(A = None B = Little C = Well D = Fluently)

<u>Language:</u>	<u>Speak</u>	<u>Read/Write</u>	<u>Understand</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Check below some of the ways you could help on this trip:

- ☐ Adults
- ☐ Youth (age: 14-18)
- ☐ Young Children (age:0-6) and Children (age: 7-13)
- ☐ Play Musical Instrument
- ☐ Medic/Nurse/Doctor
- ☐ Sports Activities
- ☐ Children's Activities
- ☐ Preaching
- ☐ Organizing
- ☐ Clowning, Skits, Mime, puppets
- ☐ Other _____

What are your ministry gifts or talents and how do you feel called to serve in the area(s) checked _____

Part V: Medical History

It is important that you are honest and complete with your medical history due to the environment in which you may be working.

#1) List all medical problems for which you have received medical care in the past 24 months: _____

#2) List any prescription drugs (and their generic names) which you are now taking: _____

#3) List any known allergies (including food allergies) or chronic life-threatening conditions: _____

#4) List any known physical/emotional limitations and/or disabilities: _____
