Mission Trip to Nicaragua 2009
Application
July 23rd through August 2nd Cost of the trip: **$1400.00**

Name **(exactly as it is stated on the passport)**: _____

☐Male ☐Female Age: _____ Profession: _____

Name you are known by: _____

Mailing Address: _____

Phone Number: _____ Cell or work phone: _____

Email: _____

Name of Emergency Contact **(required for airline ticketing)**:
_____Phone: _____

☐I have a passport OR ☐I need to apply for a passport
Provide 2 copies of your passport.

☐Deposit of $100 is included in this application, NON-REFUNDABLE.
Please record "Mission Trip" in the memo area, and **make checks payable to Lord of the Valley Lutheran Church**. **Mail to:** Lord Of The Valley Church
PO Box 843
Granby, CO 80446
(You may request a receipt detailing the tax-deductible portion of your trip costs.)

Payments of the remainder of the total **will be due quarterly** during the year:

*1st of November *1st of February *1st of May *Final payment first of July
Mail payments to Lord of The Valley Church (address above)

Are you fluent in Spanish? ☐Yes ☐No Comment: _____

Please mark which areas you wish to work:

☐Building homes ☐Bible School and Outreach Ministries
☐Medical / Dental / Optical Missions ☐Visit Casa Materna
☐Distribution of clothes and school supplies

Special Skills that you have which might be helpful_____
_____

Why do you want to be a part of the mission team to Nicaragua? _____
_____
_____

Documents to submitted with **completed application and deposit**:

- Copy of passport
- Medical Wavier
- Medical Information
- Standards of Conduct Agreement

If you have questions contact Carmen Covington @ 970-531-2857

Thank you for your desire to serve God people