

SOAR INTERNATIONAL MINISTRIES

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Attach Photo
here

SHORT-TERM MISSION APPLICATION

(For married couples, each should fill out a separate application)
Refer to website for submission and donation deadlines

Name _____ Email _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Cell (____) _____

Male ___ Female ___ Marital Status _____ Date of Birth _____

Trip Applying For _____

Employer name _____ Job Title _____

Work address _____

City _____ State _____ Zip _____

T-Shirt size: Small Med Large X-Large XX-Large Other _____

Are you taking any medication? _____ If yes, for what? _____

Do you have health conditions/disabilities that could affect your participation? _____

If yes, please explain: _____

Do you have any dietary requirements that we should be aware of? _____

If yes, please explain: _____

Church attending _____ Address: _____

Pastor's name: _____ Phone: _____

(Please ask your pastor (or other church leader) and an unrelated friend to each complete and send to SOAR the accompanying reference forms.)

Have you ever been convicted of a criminal act, physical abuse, sexual misconduct, possession or use of a controlled substance? _____ Is there any thing in your background that would disqualify you from working with children? _____ If yes, please explain on a separate sheet of paper.

How are you ministering in your church? _____

List any other ministry you have been involved in. _____

Have you ever led someone to accept Jesus Christ as their personal Savior? _____

Are you comfortable sharing the Gospel or would you like training? _____

How would you like to grow personally on this trip? _____

Circle any skills or gifts that could be used on this trip: (Music/Games/Crafts/Const./Med.)

Please explain: _____

Beyond these, what strengths do you bring on this trip? _____

Do you read, write, or speak the Russian language? ____ Explain: _____

Is there any other information related to this ministry trip that would be helpful for us to know about you? _____

Please explain on a separate sheet of paper:

1. How and when you came to know Jesus Christ as Lord and Savior.
2. What changes occurred in your life following your conversion.
3. What evidence is in your life now of a personal relationship with God.

Emergency Contact Information:

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Other: _____

Please list email addresses of anyone you would like to receive SOAR's updates while on your trip.

_____	_____
_____	_____
_____	_____

The following must accompany this application:

- Answers to the three questions on a separate sheet of paper
- Signed Doctrinal Statement
- Signed Personal Covenant
- **SIGNED** Visa Application
- Your passport (be sure that it is current and signed)
- Two (2) passport size pictures
- \$250 initial donation (pay online or with a check payable to *SOAR*)

Confirm that your pastor **and** a friend will send a reference form to SOAR for you

I attest that to the best of my knowledge, the above information is true and complete.

If accepted for a trip, I will participate voluntarily and of my own free will. I will not hold the sponsoring mission/missionaries or anyone involved in organizing or carrying out the trip responsible for any accident, injury, or other personal loss that might result from this trip. I will submit to trip leadership and maintain a cooperative spirit and godly attitude in all activities realizing that I am a testimony of Jesus Christ.

Signature: _____ Date: _____