



GROUP - LAND TEAM APPLICATION

Church/Organization: _____

Address: _____ City, Province, Postal Code: _____

Phone: _____ Email: _____

Team Leader: _____ Phone/Email: _____

Dates Available: _____

What strengths and gifts do you have as a team working together? _____

What kind of activities, special interests or areas of ministry are you hoping to be involved with as a team? _____

Team Application Fee: \$250

Land Teams are asked to make a Team Application payment of \$250.00 to the BC Mission Boat Society to help cover the administrative and preparation costs associated with your group's mission trip. With this we provide office support by arrange and promote your programs in the community, facilitate bookings for local accommodation and assist with arranging special transportation needs in and out of the community. Additionally, a member of our staff will accompany your team to provide leadership and serve as a community liaison.

In addition to the Team Application Fee, all further costs for your mission trip will be the responsibility of your team i.e. transportation, food, crafts, facility fees or donations. In addition, the team is responsible for covering the travel and meal costs while the BCMBS staff member is with the team.

Travel Arrangements:

Teams are responsible for arranging their travel to Parksville, BC, located on Vancouver Island. *Please contact our office with your travel details* i.e. travel schedule, flight information, and ferry times. This will aid us as we arrange your teams orientation and training times and pick-ups or billeting if necessary. A document with travel and accommodation information can be found on our website.

Please note that your team is not considered to be confirmed until we have received this completed application form with the Team Application Fee Payment of \$250.

TEAM MEMBERS

All team members must complete our *Land Team Application - Individual* form and its attachments.

- | | |
|----------------------|---------------------|
| 1. Team Leader _____ | Date of Birth _____ |
| 2. Name _____ | Date of Birth _____ |
| 3. Name _____ | Date of Birth _____ |
| 4. Name _____ | Date of Birth _____ |
| 5. Name _____ | Date of Birth _____ |
| 6. Name _____ | Date of Birth _____ |
| 7. Name _____ | Date of Birth _____ |
| 8. Name _____ | Date of Birth _____ |
| 9. Name _____ | Date of Birth _____ |
| 10. Name _____ | Date of Birth _____ |

Criminal Record Check:

Because we work with children, **all mission team members who are age 18 and older are required to provide us with a current Criminal Record and Vulnerable Sector Check.** (A current check is one that has been completed within twelve months of your mission trip completion.)

RECOMMENDATION FROM YOUR PASTOR

Written Recommendation: _____

I _____ hereby recommend and consider this team to be capable of Christian
(Pastor's name)
teaching ministry and will be a positive Christian influence within an isolated mission field.

Signature _____ Date _____
Email _____ Phone _____

Please attach any additional comments or contact us directly with any additional information or concerns.