

**Team Leader Information**

# 

# ReachGlobal Crisis Response, the crisis response ministry of EFCA

Revised March 2017

We exist to Develop, Empower, and Release the Body of Christ to show His love in times of crisis…to multiply Transformational churches among all people.

Mark Lewis, Director

ReachGlobal Crisis Response

19380 N. 10th Street

Covington, LA 70433

Crisis Response

**Thank You…**

Thank you for your willingness to serve with ReachGlobal Crisis Response. God sends us into areas affected by disasters to build relationships in the lives of the people with whom we will come in contact. Those relationships create the opportunity to make disciples for the Kingdom and to multiply transformational churches.

**Hands and Feet – living your faith**

Coming to serve on at team is an opportunity to live out your faith by working at the intersection of the Great Commandment and the Great Commission.

Plan to serve as God leads. Be open to ministering to the spiritual, emotional and physical needs of those affected. If you focus on letting the light of Jesus shine through you in all of the details and plans, He will be glorified and you will receive maximum joy. Removing drywall and carpet becomes an opportunity to thank God for the things He has given you. Sitting through traffic becomes a quiet time. Listening to a homeowner share their story becomes a chance to encourage another and grow relationally. Living every moment as a conduit for Christ can become life changing in this fertile environment! Your ministry investment will add to ongoing church planting partnership efforts.

**All the People of the World – it’s about the people**

We serve all of God’s people: rich, poor, all colors, shapes and sizes. Though sent to do work tasks, we are ultimately in a position to be Christ-like servants by loving homeowners and their neighbors. We have a unique chance to be Jesus in the flesh to someone who perhaps has never met Him…someone who never gave a thought to the need for a Savior in their life. ***We are about the people, not the work****.*

**“That’s Just the Way I Like It!” – God is in control**

***Flexibility*** is crucial for all short-term missionaries - which is what you are by partnering with us on this trip! No one knows what God will bring your way or ask you to do. Be ready for the unexpected by eliminating preconceived expectations. In this ministry, when things don’t go according to schedule or in the way that you think things should go, our adopted slogan is, “That’s just the way I like it!” It reminds us that God is in control and my plan is quite subpar to His. Your ***success*** in this ministry is truly measured by your ***obedience*** to God. A willing spirit and open mind will enable wonderful engagements between you, your team members, and homeowners. Please consider using the “Release of Rights” contract (included in this packet) with your team to prepare you for a week of short-term missions!

**Join the Revival – make it part of your DNA**

Our prayer is that after you return home, you will keep this experience in the forefront of your mind, and bring home the idea that serving God and people can happen right in your own back yard! While here, we hope God will ignite new ideas and passions in your heart and you and the members of your team will return home with a desire to serve the Lord in new and meaningful ways!

Serving Him in constant awe,

***ReachGlobal Crisis Response Staff***

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Response Team Application

Please indicate the location where you wish to serve:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instructions: To serve, fill out this one page document

Scan the completed document to [respond@efca.org](mailto:respond@efca.org) (if unable to scan you can fax to 985-893-0175)

Email [respond@efca.org](mailto:respond@efca.org) or call 985.888.1060 with any questions.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CHURCH INFO** | Church Name: | | | |
| Mailing Address: | | | |
| City: | State: | | Zip: |
| Phone: | | | |
| Email: | | | |
| *Please check if your church has served with EFCA Crisis Response in the following locations and number of trips at each place:*  New Orleans/Louisiana #\_\_\_\_\_  Hurricane Sandy #\_\_\_\_\_\_  Colorado #\_\_\_\_\_\_  Alabama #\_\_\_\_\_\_  South Carolina #\_\_\_\_\_\_ | | | |
|  | | | |
| Please have your pastor/elder approving this short-term mission trip sign below: | | | |
| Pastor / Elder Approver’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Phone: | | Email: | |

|  |  |  |  |
| --- | --- | --- | --- |
| **TEAM INFO** | Team Leader Name: | | # of Men:  # of Women: |
| Cell Phone: | | Total # of Team Members: |
| Other Phone: | |  |
| Email: Arriving by: Car Van Bus Plane Other | | |
|  | | |
| 1st Choice Arrival: **/  /** | | 2nd Choice Arrival: **/  /** |
| 1st Choice Departure: **/  /** | | 2nd Choice Departure: **/  /** |
| *Requested dates are subject to availability until an email confirmation is received* | | |
| Our Team will likely have the following skills: | General Labor /Clean-up  Heavy Equipment Operator  Painting  Carpentry  Electrician  Prayer  Masonry  Fencing  Plumbing  Cooking  Drywall  Concrete  Roofing  Landscape  Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Team Fees:**  $25 deposit per person due upon emailed confirmation from [respond@efca.org](mailto:respond@efca.org).  Total fee: $275 per person for the week; or $140 for half week (exclude deposit from total when applicable). Please send payment forms on pages 29 and 30 when making payments. | | |

*TEAM LEADER CHECKLIST*

*All items listed below, unless noted, must be scanned to respond@efca.org.*

*If you are unable to scan, fax to 985.893.0175. Payments and original notarized liability forms*

*must be mailed to: ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433*

* Pray. Ask God to guide your church, you and your team members as you seek His will in sending you to the mission field. "Trust in the Lord with all your heart and lean not on your own understanding; in all your ways acknowledge him, and he will make your paths straight" (Proverbs 3:5-6).
* If you haven’t already done so, complete a team application found on the previous page (page 4) in this packet.
* Scan your completed application to [respond@efca.org](mailto:respond@efca.org). If you are unable to scan, you can fax your application to 985-893-0175. Another option is to mail the application to ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433. Your application will be reviewed to ensure the dates are available.
* If you have not received confirmation within five working days for application that was scanned or faxed, please email [respond@efca.org](mailto:respond@efca.org) to confirm application was received. Upon confirmation you will receive additional site specific information, such as details on housing and meals.
* Complete the Deposit Payment Form (page 29) and attach one check to cover the $25 per person non-transferable, non-refundable deposit **after** you receive confirmation that your mission dates are available. Send the Deposit Payment Form with the deposit to ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433.
* Continue to pray. Ask God to guide your church, you and your team members as you obey Luke 10:2: "The harvest is plentiful, but the workers are few. Ask the Lord of the harvest, therefore, to send out workers into his harvest field.” The most important thing you can do daily is to pray for your team. From the seed of an idea to serve to the moment you return, our desire is that as the team leader you will be in constant prayer for your team.
* Read the entire **team** **leader** packet to get an overview of your mission trip AND to review the documents. As the team leader, you have accepted the responsibility to coordinate the completion of the paperwork for your team.
* Create a binder to hold all your documents related to your mission trip, including completed documents as team members submit them to you. You will be required to scan and submit documents to the Pre-field Volunteer Coordinator, so it is quite helpful to keep all ReachGlobal documents in one central location.
* Calculate the cost of the trip. Known costs per person are listed on page 8.

**TEAM LEADER CHECKLIST (continued from page 5)**

* Develop a calendar of scheduled meetings with your team. It’s highly suggested that you meet regularly to build a team that is unified and God honoring. Meetings should take place in a place where everyone will be comfortable, yet alert to plan for the mission trip.
* Schedule team meetings.
* Distribute liability waivers and photo release forms to each team member on your team (pages 22-23 for adults and 24-25 for minors).
* If team members are required to raise support, ask them to draft their support letters as soon as possible, but to obtain your review and approval of their support letter prior to mailing. A sample letter requesting support is in the site specific information sent to you after your confirmation.
* Distribute the “Release of Rights” form to team members from your site specific info. This form is **not** to be returned to ReachGlobal, but is a tool for the team leader to review with each team member to remind them that God is in control and they are in God’s care.
* Please check with your team to see if there are any medical conditions that could cause difficulty to participate on a mission trip. If there are concerns or questions about the health of any team member, please email [respond@efca.org](mailto:respond@efca.org) or call 985-888-1060 before purchasing a plane ticket for the individual in question (i.e. bladder or heat related issues, allergies, etc.).

**MINIMUM OF EIGHT WEEKS PRIOR TO DEPARTURE (before if possible)**

* If traveling by plane, purchase team’s airline tickets (air travel is a separate cost from the ReachGlobal fee). Book flights for a Sunday arrival (landing before 4:00 pm) and a Saturday departure (flight leaving before 11:00 am) for a full week mission trip. Contact [respond@efca.org](mailto:respond@efca.org) if requesting alternative dates or travel times.

**MINIMUM OF SIX WEEKS PRIOR TO DEPARTURE (before if possible)**

* Inform the team that they will be required to submit **four** **original** signed and notarized Policy Agreement, Permission, and Release of Liability forms to the team lead at least four weeks prior to your arrival to the mission field. The team leader **mails** (using the US postal service) one original notarized liability waiver to ReachGlobal Crisis Response 19380 N 10th St Covington, LA 70433 to ensure the completed waivers arrive a minimum of three weeks **before** your mission begins. Instructions for the distribution of the notarized forms are on page 10. The packet contains one liability form for adults (pages 22-23) and another for minors and their parents to complete (pages 24-25).

**MINIMUM OF FIVE WEEKS PRIOR TO DEPARTURE (before if possible)**

* **Prior to mailing,** scan each volunteer’s 2 page Policy Agreement, Permission, and Release of Liability form to [respond@efca.org](mailto:respond@efca.org). The staff will review the forms and let the team leader know if any information is missing. Once the staff determine that the scanned liability forms are complete, they will notify the team leader to mail one original signed and notarized waiver per volunteer to ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433. A second signed and notarized copy will go with the team to their mission trip location.
* **Inform team members to obtain a Tetanus shot** if the volunteer as not had one in the last 10 years. You do not need to provide confirmation; however, let team members know the importance of a Tetanus shot due to the nature of relief work.
* Obtain each team member’s complete name, address, phone numbers, email address and t-shirt size to complete the Volunteer Team Roster (pages 26-27).

**MINIMUM OF FOUR WEEKS PRIOR TO DEPARTURE (before if possible)**

* Scan a completed copy of the Team Member Skills Assessment (pages 20- 21) to [respond@efca.org](mailto:respond@efca.org).

**MINIMUM OF THREE WEEKS PRIOR TO DEPARTURE (before if possible)**

* Mail the balance check payable to EFCA in the amount of $250 per person (full week) using the **Balance Payment Form** (page 30). If the deposit was not yet submitted, send in $275 per person for a full-week mission trip. List the location you are serving and ‘Team Balance’ in memo line of the bottom of the payment.
* Scan a completed copy of the Volunteer Team Roster (page 26) to respond@efca.org.
* Scan a completed copy of the EFCA Photo Release form (page 28) to respond@efca.org.
* Scan a completed copy of the Team Demographics form (page 31) to respond@efca.org

**ON ARRIVAL**

* Give one **original** notarized EFCA Policy Agreement, Permission, and Release of Liability form to the job site supervisor for each volunteer working with that specific supervisor. The goal is to have the waiver at the worksite in the rare instance an emergency occurs.

*TRIP COSTS*

**Full Week Cost**: The total cost for the trip is $275 plus travel and personal expenses.

Included in the fees listed above each volunteer will receive a ReachGlobal Crisis Response t-shirt. Volunteers may purchase an additional t-shirt for $10.

**Half Week:** This option is available for some locations. Please email [respond@efca.org](mailto:respond@efca.org) for more details if you are interested in this option.

**Payments:** The mission trip fee is paid in two payments. A $25 per person non-refundable, non-transferable deposit is required when you receive confirmation that your application to serve was approved.

The $25 deposit per person will be applied to the $275 for the mission trip. Send the deposit no later than 30 days prior to the team’s arrival on the mission field.

**Example: Calculating Mission Fee for Team of 10**

**Full week team:**

Deposit: 10 x $25 = $250

Balance pmt 10 X 250=$2500

Total for trip= $2750\*

All travel, incidental costs and lunches are the team's responsibility

The trip cost goes toward sustaining the volunteer response during the long-term recovery, ministry/construction supplies/materials, and to cover ongoing ReachGlobal ministry needs.

To make your deposit, please complete the Team Deposit Payment Form (page 29), attaching **one check** to pay for the entire team. Make the check payable to "EFCA" In the memo line, please note your church’s name if it’s not on the check, and the location where you will be serving. The amount of the check is based upon the number of volunteers you plan to send (see example above).

Mail deposit check to:

**ReachGlobal Crisis Response**

**19380 N. 10th Street**

**Covington, LA 70433**

One month prior to your arrival, complete the Balance Payment Form (page 30), attaching the balance check for the entire team made payable to “EFCA”. Please continue with the practice of noting the name of your church and where you are serving in the memo line.

The amount of the balance check is based upon the number of volunteers who are going on the mission trip. In the Calculating Mission Fee for Team of 10, example above, if the number of volunteers for a full week mission trip remained at ten (10), the balance check would be made out to EFCA in the amount of $2500 ($250 x 10). Please use the mailing address listed above.

*PAPERWORK*

As the team leader, you have the responsibility to collect and send the following completed forms to ReachGlobal Crisis Response to capture information on each volunteer on your team:

* Policy Agreement, Permission, and Release of Liability form
* Team Member Skills Assessment
* Volunteer Team Roster
* Photo Release
* Team Demographics

The following pages are provided to help you correctly complete the forms prior to sending the materials to ReachGlobal Crisis Response. Once you submit your documents, the Pre-field Coordinator will contact you if necessary with a request to provide missing or incomplete information.

The notarized liability waivers (pages 22-25) are the only documents, other than payments, that must be mailed to 19380 N. 10th Street, Covington, LA 70433. The Volunteer Team Roster, Team Member Skills Assessment, Photo Release, and Team Demographic form can be scanned to [respond@efca.org](mailto:respond@efca.org) or mailed to ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433.

**INSTRUCTIONS:**

***Team Member Skill Assessment – see page 20***

|  |  |
| --- | --- |
| The Team Member Skill Assessment is used by the ReachGlobal Construction Supervisor to determine what special skills or talents you have that will be useful for the types of work the team will do while on the mission field.  It is perfectly fine if volunteers do not have experience as long as they have a heart to learn and a willingness to let God lead them. |  |

***Policy Agreement, Permission, and Release of Liability Form (1 of 2 pages) – see page 22***

|  |  |
| --- | --- |
| 1a. Fill in the information on the front of the two-page liability waiver as shown in the example to the right. **Wait to sign the form until a notary is present.**  If volunteer is under 18, complete the liability form for minors (page 24-25). The parent must be present to sign in front of the notary. | ../../../var/folders/kw/5hrrvfcn17g_j3s00m6nbwd80000gp/T/1458142021.200281/2016-03-16_09-0 |

***Policy Agreement, Permission, and Release of Liability Form (2 of 2 pages) – see page 23***

|  |  |
| --- | --- |
| 1b. Complete the second page of the liability form. Complete the requested information, including your two emergency contacts and insurance information. Volunteers **must** document they have medical insurance by listing medical provider and policy and/or acct# to participate.  2. Make three copies of the original two-page form you completed **before** forms are signed. You should now have four waivers ready to be notarized.  3. In the presence of the notary, sign all four (4) forms and have the notary sign all four.  4. **Form distribution:**  **4a**. Volunteer keeps one set of forms for their records  **4b**. Give your church/organization a set  **4c.** Team Leader – three weeks before trip, mail (US mail) one original liability waiver (2 pages per volunteer) to:  RGCR, 19380 N. 10th St. Covington, LA 70433  **4d**. Bring second original notarized liability waiver to mission field. |  |

**Volunteer Team Roster – see page 26**

|  |  |
| --- | --- |
| The Volunteer Team Roster allows you to type in the volunteer data. This page is the first of two pages found in this packet that allows you to enter volunteer information. The very first field on the Roster “Mission Trip” please enter the location of your trip in this space. Complete each question. The only question that could possibly be left blank is the phone numbers if you do not have a land line or a cell phone. When completing the question related to the age of the volunteer, if someone on your team is younger than 14, please call the ReachGlobal Crisis Response office at 985.888.1060 to discuss with the staff the guidelines for children on mission trips. |  |

***Supplementary Volunteer Team Roster – see page 27***

|  |  |
| --- | --- |
| The Supplementary Volunteer Team Roster is to document Volunteer roster data #5 through #10. If your team is larger than 10 people, use the Microsoft® Word “Save As” feature, giving the document a unique name (i.e.,Church#1). Close the saved form. Reopen the original Supplementary Roster to enter data for Volunteer #11 through #16. Save each page, giving a unique name to each subsequent page until all volunteer information is entered.  Once done, scan complete Roster to [respond@efca.org](mailto:respond@efca.org) or mailed to ReachGlobal, 19380 N. 10th Street, Covington, LA 70433. | ../../../var/folders/kw/5hrrvfcn17g_j3s00m6nbwd80000gp/T/1458142963.419442/2016-03-16_10-3 |

***EFCA Photo Release – see page 29***

|  |  |
| --- | --- |
| **By signing the EFCA Photo Release, you are allowing ReachGlobal Crisis Response to use your photo in ministry materials such as brochures, newsletters, or blogs.**  **A parent must sign the form if the volunteer is younger than 18 years of age.** |  |

*PREPARING FOR YOUR MISSION TRIP*

***POSSIBLE WORK TEAM ASSIGNMENTS*:**

* + Construction
  + Relational Ministry
  + Prayer
  + Help support our Church Planter partners in a variety of ways
  + Community Ministry (VBS; sports; music; etc.)
  + Other needs as determined

Please submit the Team Member Skill Assessment (page 20) to [respond@efca.org](mailto:respond@efca.org) at least **four** weeks before your team arrives. ReachGlobal staff to use this information to best utilize the skills and gifts of your team. Please understand that we may need to divide your team into multiple groups based upon the work assignments scheduled during your time on the mission field.

Your work will be assigned prior to your arrival. You can expect a call from ReachGlobal staff approximately one week before discussing what you most likely will be working on during your trip. If upon your arrival you are assigned to a different task, please be flexible and willing to do whatever is needed.

Thank you in advance for your flexibility!

***PRE-FIELD WORK TRAINING:***  Many potential work assignments include various aspects of reconstruction. In order to better prepare your team for construction type work, and to help build team unity, we suggest that you contact your local home improvement store, requesting that they provide training classes for basic reconstruction elements, such as drywall hanging and finishing; painting; or roofing. We have found that most stores will even schedule special classes for your group, especially when they know that you’ll be working at a crisis response site. An alternative idea is to utilize a contractor in your church to hold such training classes, or perhaps even work with that contractor to help a needy person in your own community, learning while serving. While this pre-field work training is not mandatory, it can be used to develop skills and build team unity.

***PRE-FIELD MINISTRY TRAINING:*** Since the focus of our ministry is people, we ask that you, as part of your team building and trip preparation, engage in at least three (3) team meetings to pray for the trip; to study God’s Word in relation to compassion, service and share the Gospel; to build team relationships; and to coordinate logistics for the trip. We also suggest that you consider serving as a team in your own community prior to coming to serve.

***TEAM MANAGEMENT:*** You are responsible for transporting your team and the tools to the site each day. Please be flexible with us as specific work assignments may require that your group be divided up to work at multiple worksites. Someone on your team will be asked to be a site team leader to work along side the site supervisor, a ReachGlobal staff member or trained friend of the ministry. The site team leaders will be provided with contact information, directions and maps to their work sites.

*LOCATION AND NAVIGATION*

***LOCATION OF WORKSITES*:** A description of your likely worksites for the week will be shared with you prior to your arrival by either the onsite volunteer coordinator or the construction supervisor. On your frst full day with us, your training will include the address of where you will be serving. Once you have the exact address, most people find that the Global Positioning System (GPS) on their cell phone works best for navigating to the worksite. A secondary option for mapping the route from your location to the worksite is to use [www.mapquest.com](http://www.mapquest.com).

***PARKING:*** Parking availability is based upon where your team is scheduled to work. It’s anticipated that you will be able to park in front of or near the site where you will be working. Be sure to by parking signs to avoid a parking citation.

*WEEKLY SCHEDULE*

F**ull week mission trip** starts Sunday evening and concludes Saturday morning. Teams have the option to leave Friday afternoon to start their journey home or depart early Saturday morning.

***FULL-WEEK SCHEDULE (subject to change)***

SUN – Arrival – get settled in, purchase food, orientation

MON – WEDNESDAY – Devotions, workday, prayer walk, relationship building

THURS – Devotions, workday, prayer walk, relationship building, sharing time

FRI – Devotions, Team Debrief, Half workday

SAT –Please plan to depart for home by 9 am

*PACKING LISTS (Page 1 of 2)*

**WORK TEAM PACKING LIST**

Teams are usually divided into group of six volunteers per worksite. The items below can be brought with you or purchased locally once you arrive. Please bring/provide for your volunteer team the following:

 Hand sanitizer

First Aid Kit

 Lunch items for everyone (you will make lunches to take to the sites)

 Snacks

 8pk paper towels (You will want this on your work site!)

Work gloves and dust masks.

The items listed below are not necessary, but are helpful when at the worksite. Some locations may have enough for you to borrow.

Ice Chest/5-gallon Igloo or similar (one for every six people)

 1 box of 55gal heavy weight contractor trash bags

Optional:

GPS

Gatorade bottles or dry mix

Portable Radio/CD player for work site

*PACKING LISTS (Page 2 of 2)*

**PERSONAL PACKING LIST**

 Bible

 A flexible and servant-like heart and attitude!

 Sleeping bag/linens

 Pillow

 Flashlight

 Soap

 Shampoo/conditioner

 Deodorant

 Toothbrush/toothpaste

 Towel

 Insect repellant

 Sunscreen

 Handi wipes

CLOTHES:

 Work clothes

 Long-sleeved shirts for November-April

Long pants and/or cargo shorts

Casual clothes for evening times and traveling

 Sweater, sweatshirt, or light jacket in season

 Modest sleeping clothes

Raingear

Hat

 Versatile walking shoes

Work shoes (Tennis Shoes are acceptable; steel toes are not required, but if you have them, bring them!)

 Flip-flops for showers or evenings

Optional:

 Earplugs

 Laptop (WI-FI not available in all locations)

 Alarm clock

 Gift cards to donate to the ministry from Lowes, Home Depot, Wal-Mart etc.

*IMPORTANT ITEMS TO CONSIDER*

**REST**

An overly tired worker may not be able to minister effectively when opportunities arise. It is important that everyone work at a reasonable pace throughout the day and stay hydrated.

**RISK**

The work sites will by nature have risks associated with them. Your safety is not guaranteed. We ask that each team member read, sign and have notarized the EFCA Policy Agreement, Permission, and Release of Liability for Adults or Minors. The waiver sheets must be completed, notarized and submitted to the Pre-field Volunteer Coordinator **at least three weeks** before you leave for this trip. Anyone under the age of 18 must get a parent or guardian to sign the waiver. Also, while at some work sites, wearing long pants are suggested, so plan ahead and include a pair of long pants in your suitcase. Safety goggles are also recommended. **A Tetanus immunization within the last 10 years is required**, but documentation is not required. Confirm with each volunteer that their Tetanus shot is current.

**MAILING ADDRESS FOR FORMS AND FEE PAYMENTS**

**(Please include payment forms on pg 30 & 31 with checks)**

ReachGlobal Crisis Response

19380 N. 10th Street

Covington, LA 70433

**QUESTIONS**

If you have any questions or concerns, please don’t hesitate to call us at 985.888.1060 or email us at [www.respond@efca.org](http://www.respond@efca.org).

**Team Member Skill Assessment**

***Please complete and e-mail to respond@efca.org 4 weeks prior to arrival.***

▪ Please write a number 1 through 6, as each skill applies to each team member.

▪ If you have no experience at all, please leave that box blank unless you are willing to learn.

▪ If you are licensed in a given area (e.g., plumbing, electrical), please write that next to your name.

**1 – Willing to learn 2 – Have helped before 3 – Work at frequently 4 – Experienced Do-It yourselfer**

**5 – Make a living at 6 - Licensed**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Organization/**  **Church Name**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Week Coming to Serve**  **Team Leader**  **Please list team members** | **Age Range**  **1= under 14 2=14-15 3=16-17 4=18-39 5=40-59 6=60 plus** | **Pastor, elder, ministry leadership (Please specify)** | General/Versatile laborer | **General Contractor** | **General Carpentry** | **Finish Carpentry** | **Drywall Hanger** | **Drywall Finisher** | **Framing** | **Painting** | **Flooring** | **Siding** | **Windows** | **Roofing** | **Electrician** | **Plumbing** | **Heating/AC** | **Tile Setting** | Ma**sonry** | **Counseling** | **Prayer** | **Visitation** | **Mechanic** | **Other (please specify)** |
| 1. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Team Member Skill Assessment**

***Please complete and e-mail respond@efca.org 4 weeks prior to arrival.***

▪ Please write a number 1 through 6, as each skill applies to each team member.

▪ If you have no experience at all, please leave that box blank unless you are willing to learn.

▪ If you are licensed in a given area (e.g., plumbing, electrical), please write that next to your name.

**1 – Willing to learn 2 – Have helped before 3 – Work at frequently 4 – Experienced Do-It yourselfer**

**5 – Make a living at 6 - Licensed**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Organization/**  **Church Name**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Week Coming to Serve**  Team Leader  **Please list team members** | **Age Range**  **1= under 14 2=14-15 3=16-17 4=18-39 5=40-59 6=60 plus** | **Pastor, elder, ministry**  **leadership (Please specify)** | General/Versatile laborer | **General Contractor** | **General Carpentry** | **Finish Carpentry** | **Drywall Hanger** | **Drywall Finisher** | **Framing** | | **Painting** | **Flooring** | **Siding** | **Windows** | **Roofing** | **Electrician** | **Plumbing** | **Heating/AC** | **Tile Setting** | Ma**sonry** | **Counseling** | **Prayer** | **Visitation** | **Mechanic** | **Other (please specify)** |
| 9. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 13. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 14. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 15. |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**

**Policy Agreement, Permission, and Release of Liability**

* ***Please complete each of the four gray blanks in the text with the appropriate information.***
* ***Print 4 completed, two-sided copies of the form, and have each copy notarized (required).***
* ***If on a team, please give 3 copies to your team leader 30 days before departure to the field.*** *The 4th copy* ***i****s for your own record.* ***Team leader****: For each team member, please send at least 3 weeks prior to departure 1 notarized copy of this form* *to the appropriate address below. Give 1 copy to your church leaders, and bring 1 copy with you to the field.*
* ***If going as an individual****, please send at least 3 weeks prior to departure 1 notarized copy of this form to the appropriate address below. Give 1 copy to your sending church, bring 1 copy to the field to give to the ReachGlobal staff or appointed host, and 1 copy is for your own records.*

I do hereby acknowledge that I,       (your name) , consent to participate on a short-term mission in       (location) during these dates       with the ReachGlobal team serving there, including but not limited to, foreign and domestic travel, ministry training, construction, outreach ministry, sightseeing, sports, recreation, and debriefing.

I agree to abide by any policies and procedures as are deemed necessary, for my management and safety, by the short-term mission leaders and/or supervisory personnel of and/or ReachGlobal. I realize that infraction of rules, misconduct, or culturally inappropriate behavior will result in my dismissal from the short-term mission. In the event that I am dismissed, I agree to return home immediately, entirely at my own expense. I understand that there will be no refund of the short-term mission package cost.

I, of my own free will and under no duress whatsoever, do absolutely and unconditionally release EFCA, ReachGlobal,       (my church), their agents, employees, and volunteers from any liability whatsoever for any damage, loss, accident, hardship, injury, sickness, disease, or death that I may sustain for any reason during my travel and service with ReachGlobal, or from any other cause, event or occurrence, including, but not limited to, natural disasters, animal attack, terrorist acts, war, civil disturbances, and alleged negligence. I acknowledge and accept that, in any travel and on any construction site, there is inherent risk. I hereby fully and voluntarily accept such risk, and serve entirely at my own risk.

I fully understand and agree that ReachGlobal is opposed to the payment of ransom for the return of its members or their families who have been kidnapped for financial reasons, taken hostage for political reasons, or seized for any other purpose or reason. I agree to support the Crisis Management Team (CMT) appointed by ReachGlobal, should such an event occur, and further agree not to interfere with or bypass the crisis management process established by said CMT.

Any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text is available at [www.HisPeace.org](http://www.HisPeace.org)). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

I understand that ReachGlobal does not accept responsibility for any lost, damaged, or stolen personal property.

Furthermore, ReachGlobal and its appointed short-term mission leaders, and/or personnel have my permission to authorize medical treatment, including administration of medication, anesthesia, emergency surgery, or hospitalization for me as is deemed necessary by the aforementioned and the attending physician. I agree to assume complete financial responsibility for all medical bills incurred by me, and agree to reimburse ReachGlobal fully for medical payment made on my behalf. My major medical insurance policy covers me while I am abroad, or if not, I will purchase short-term medical insurance that will cover me on this short-term mission.

I agree to assume total financial responsibility for me to travel home immediately if it is necessary to dismiss me from the short-term mission for either disciplinary or medical reasons.

I do willingly affix my signature in full and unreserved agreement with all of the aforementioned statements and agreements.   
  
X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

**Legal signature of team member** **Date**

**Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_\_\_ 20\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature and seal of notary public My commission expires** Seal/Stamp

**Emergency contacts for:** ­­­­­­­­­­­­­­­**­­­­­­­­­­­**

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Email:

**If you need short-term medical**

**insurance we recommend:**

**Gallagher Charitable International**

**Insurance Services**

1-803-758-1400

<http://www.aaintl.com/>

Or **Insurance Services of America**

1-800-647-4589

<http://www.missionaryhealth.net/shortterm/>

Or **Your Travel Agent**

**Health Insurance Company that will cover you**

**during your Short-term mission experience:**

Company name:

Policy:       Account:

**Primary emergency contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

**Alternate emergency contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

**Pastoral contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

****

**Policy Agreement, Permission, and Release of Liability for a Minor**

* ***Please complete each of the four gray blanks in the text with the appropriate information.***
* ***Print four completed, two-sided copies of the form, and have each copy notarized (required).***
* ***If on a team, please give 3 copies to your team leader 30 days before departure to the field.*** *The fourth copy* ***i****s for your own record.* ***Team leader****: For each team member, send one copy of this notarized form to ReachGlobal at the address below, 3 weeks prior to departure. Give one copy to your church leaders, and bring one copy with you to the field.*
* ***If going as an individual****, please send one copy to ReachGlobal at the address below, send one copy to your sending church, bring one copy to the field to give to the ReachGlobal staff or appointed host, and one copy is for your own records.*

I/we do hereby grant permission for my son/daughter,       (name), to participate on a short-term mission in       (location), during these dates       , with the ReachGlobal team serving there, including but not limited to, foreign and domestic travel, ministry training, construction, outreach ministry, sightseeing, sports, recreation, and debriefing.

I/we agree to abide by the policies and procedures as are deemed necessary, for my son/daughter’s management and safety, by the short-term mission leaders and/or supervisory personnel of and/or ReachGlobal. I realize that infraction of rules, misconduct, or culturally inappropriate behavior will result in my dismissal from the short-term mission. In the event that my son/daughter is dismissed, I/we agree that my son/daughter will return home immediately, entirely at my/our own expense. I/we understand that there will be no refund of the short-term mission package cost.

I/we, of my/our own free will and under no duress whatsoever, do absolutely and unconditionally release EFCA, ReachGlobal,       (son/daughter’s church), their agents, employees, and volunteers from any liability whatsoever for any damage, loss, accident, hardship, injury, sickness, disease, or death that may be sustained by my son/daughter for any reason during his/her travel and service with ReachGlobal, or from any other cause, event or occurrence, including, but not limited to, natural disasters, animal attack, terrorist acts, war, civil disturbances, and alleged negligence. I/we acknowledge and accept that, in any travel and on any construction site, there is inherent risk, and that my son/daughter/I/we accept(s) that risk, and serve(s) entirely at his/her/my own risk.

I/we fully understand and agree that ReachGlobal is opposed to the payment of ransom for the return of its members or their families who have been kidnapped for financial reasons, taken hostage for political reasons, or seized for any other purpose or reason. I/we agree to support the Crisis Management Team (CMT) appointed by ReachGlobal, should such an event occur, and further agree not to interfere with or bypass the crisis management process established by said CMT.

Any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text is available at [www.HisPeace.org](http://www.HisPeace.org)). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

I/we understand that ReachGlobal does not accept responsibility for any lost, damaged, or stolen personal property.

Furthermore, ReachGlobal and its appointed short-term mission leaders, and/or personnel have my/our permission to authorize medical treatment, including administration of medication, anesthesia, emergency surgery, or hospitalization for my son/daughter as is deemed necessary by the aforementioned and the attending physician. I/we agree to assume complete financial responsibility for all medical bills incurred by my son/daughter/me, and agree to reimburse ReachGlobal fully for medical payment made on behalf of my son/daughter. My/our major medical insurance policy covers my son/daughter while he/she is abroad, or if not, he/she/I will purchase short-term medical insurance that will cover my son/daughter while serving on this short-term mission.

I/we agree to assume total financial responsibility for my son/daughter to travel home immediately if it is necessary to dismiss my son/daughter from the short-term mission for either disciplinary or medical reasons.

I do willingly affix my/our signature(s) in full and unreserved agreement with all of the aforementioned statements and agreements.   
  
X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of parent or legal guardian (if team member is a minor) Date**

If issues of legal custody are involved, please attach explanation and documentation.

**Subscribed and sworn to before me on this \_\_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of notary public My commission expires** S**eal of notary public**

***Submit******one******notarized*** *copy of this release and emergency information form to the correct address below for each person serving on:*

* ***A ReachGlobal Crisis Response Opportunity:*** ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433
* ***All Other Short-term Mission Opportunities:*** ReachGlobal, 901 East 78th Street, Minneapolis, MN 55420-1300, Attn: CONNECT

**Emergency contacts for:** ­­­­­­­­­­­­­­­**­­­­­­­­­­­**

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Email:

**If you need short-term medical**

**insurance we recommend:**

**Gallagher Charitable International**

**Insurance Services**

1-803-758-1400

<http://www.aaintl.com/>

Or **Insurance Services of America**

1-800-647-4589

<http://www.missionaryhealth.net/shortterm/>

Or **Your Travel Agent**

**Health Insurance Company that will cover you**

**during your Short-term mission experience:**

Company name:

Policy:       Account:

**Primary emergency contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

**Alternate emergency contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

**Pastoral contact:**

Relationship to team member/leader:

Address:

City:       State:       Zip:

Home phone:       Work phone:       Cell phone:

Work hours:       Email:

**ReachGlobal Crisis Response Volunteer Team Roster**

All emails provided for those 18 and older will receive the ministry-wide newsletter. You may unsubscribe at any time.

Mission trip:  Start date of trip:       Church/Org. Name:

**Instructions:** In the area below, type in the information for up to four volunteers. Use the

Supplementary Volunteer Team Roster (next page) to provide information on additional volunteers.

Scan completed Roster to [respond@efca.org](mailto:respond@efca.org) or mail to ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433.

|  |  |
| --- | --- |
| Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender: Male Female  Over 17: Yes  If no, enter age:  Shirt Size: S  M L XL 2XL | Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL |
| Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL | Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL |

**Supplementary Volunteer Team Roster**

All emails provided for those 18 and older will receive the ministry-wide newsletter. You may unsubscribe at any time.

Mission trip: Church/Org. Name:

**Instructions:** Use the Roster on page 31 to enter data on the first four volunteers. Use the supplementary form to enter data on six additional volunteers. For a large group, use the Microsoft® Word “Save As” feature, giving the document a unique name (i.e. Church#1). Close the saved form. Reopen the original Supplementary Roster to enter more data. Save additional pages as Church#2, Church#3, Church#4, etc.

|  |  |
| --- | --- |
| Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL | Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL |
| Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL | Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL |
| Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL | Name:  Address:  City:       State:    Zip:  Phone (Home):  Phone (Cell):  Email Address:  Gender (check box): Male Female  Over 17: No  Yes  If no, enter age:  Shirt Size: S  M L XL 2XL |



901 East 78th Street, Minneapolis, MN 55420-1300

(800) 745-2202 • [www.efca.org](http://www.efca.org)

**Photo Release**

I hereby grant to the Evangelical Free Church of America (EFCA) and to its employees, agents and assigns the right to photograph me or my dependent and use the photo and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet.

Model's Signature:

Model's Printed Name:

Address:

Date:

For minor children:

I certify that I am a custodial parent and have the aforementioned rights to assign.

Signature of Parent or Guardian:

Print Name of Parent or Guardian:

Address:

Date:

Please send to:

**ReachGlobal Crisis Response**

**19380 N. 10th Street**

**Covington, LA 70433**

**RESPONSE TEAM DEPOSIT**

**Payment Form**

*(Please include with payment. Do not staple. Make check payable to EFCA.)*

Church/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Response Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trip Dates (arriving/departing): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 **DEPOSIT**: \_\_\_\_\_\_\_ people x $25 = **Total Enclosed $\_\_\_\_\_\_\_\_\_\_\_**

Please send to:

**ReachGlobal Crisis Response**

**19380 N. 10th Street**

**Covington, LA 70433**

**RESPONSE TEAM BALANCE PAYMENT**

**Payment Form**

*(Please include with payment. Do not staple. Make check payable to EFCA)*

Church/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Response Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Trip Dates (arriving/departing): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team Leader: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

🞎 **BALANCE PAYMENT**: \_\_\_\_\_ people x $250 for full week = $\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ people x $275 for full week if no deposit paid $\_\_\_\_\_\_\_\_\_\_

TOTAL ENCLOSED = $ \_\_\_\_\_\_\_\_\_\_



**TEAM DEMOGRAPHICS AND DETAILS**

As you prepare to set out on your mission trip, we ask that you **print, complete, then scan** this form to [respond@efca.org](mailto:respond@efca.org). The answers to the following questions equip the ReachGlobal team to coordinate the details of your mission trip. Please submit this form a minimum of two weeks prior to your arrival to the ReachGlobal response site. If you have questions or concerns, please contact the Pre-field Coordinator by emailing [respond@efca.org](mailto:respond@efca.org) or by calling our main office at 985.888.1060.

* Name of your church/organization?:
* Response location (check the box to indicate where your team is going to serve)?:
* Columbia, South Carolina \_\_\_\_\_\_
* New Orleans, Louisina \_\_\_\_\_\_
* Southeast Louisiana (Denham Springs, Baton Rouge, Robert, etc.) \_\_\_\_\_
* Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Date you will arrive at the response site **(MM/DD/YY)**?:
* If driving from home to response site, number of vehicles used to transport team?: \_\_\_\_\_\_\_\_
* Estimated time you plan to arrive at the response site (list am or pm)?: **\_\_\_\_:\_\_\_\_** (Example 4:30 pm)
* Date you will leave the response site to head back for home **(MM/DD/YY)**?:
* Estimated time you plan to depart (head home) from the response site (indicate am or pm)?: **\_\_\_\_:\_\_\_\_**
* If flying from your home to the response site, list the airport that you are flying into?:

Airline name:

Scheduled time of arrival:

Number of cars team is renting:

* If flying from response site to return home, list the airport that you are flying out of?:

Airline name:

Scheduled time of departure:

* Gender breakdown of the team (all volunteers, including leaders)?:

Females –

Males –

* Is the information a change of size or gender make up of group?:
* No
* Yes
* Is your team prepared to present morning devotionals?:
* No
* Yes
* Cell phone number(s) of team leader(s)?:

Name: Cell:

Name: Cell: