

Deadline: February 3rd, 2025

Puerto Peñasco, Mexico Application
March 15th - 21st, 2025

Team Checklist: (All items Due February 3rd, 2025)

___ Personal Data/Emergency/Medical/Insurance Form | *complete.*

___ Transportation Preference

___ Response Questions (typed and attached) | *complete.*

___ Team Commitment and Covenant | *signed by the participant.*

___ LifePointe Church Release Form | *signed by each adult participant.*

___ Total Cost for expenses in Mexico is \$200 Per Person (Age 12 & Older), Children 11 and younger, no cost. \$100 Per Person deposit | *cash or check payable to "LifePointe Church." Due February 3rd (Final Amounts Due February 28th, 2025)*

___ Estimated travel cost per person (gas, food, lodging) is an additional \$250.

___ Attend the required team meetings:

1. February 2nd, Sunday, 12 noon-1pm: Team Meeting #1 – Fireside Room – Lunch Provided

2. March 9th, Sunday, 12 noon-1pm: Team Meeting #2 –Fireside Room – Lunch Provided

2025 Amor Mexico Trip – Travel Preferences

There are options for travel to Mexico in March. The trip is approximately 1,150 miles each way. You may prefer to drive your own vehicle, or ride with another, or travel in the 15-passenger van we are planning to rent.

Please know that if you drive your own vehicle, mandatory supplemental insurance is required and that typically costs between \$90 and \$150 depending on the year and make of your vehicle.

We would like to know your preferences.

Name _____

Email: _____

_____ I prefer traveling in my own vehicle.

I am planning on taking _____ people in my car.

I have _____ spaces available for others to ride with us.

_____ I prefer to travel in the 15-passenger van

There are _____ people traveling with me (including myself)

_____ I would like to arrange a ride in another person's vehicle and prefer to ride with _____

Personal Data (Confidential) - Emergency/Medical/Insurance Form – Page 1

Personal Data

Name: _____ Sex: M ___ F ___
Address: _____ Cell Phone: _____
Date of Birth: _____
Passport Number: _____ Issue Date: _____ Expiration
Date: _____
Email Address: _____

In Case of Emergency

Contact person: _____ Relationship: _____
Home Address: _____ Cell Phone: (____) _____
_____ Work Phone: (____) _____
Email Address: _____

Medical Information

Doctor's Name: _____ Date of Last Physical Exam ____/____/____
Blood Type: _____ General Health for the past 2 years: Excellent _____ Fair _____ Poor _____
Information about any prescription medications currently being used:

I am ALLERGIC to: _____

Special Dietary needs: _____

Do you now have or have you had any history of the following. If yes, describe below:

<input type="checkbox"/> High Blood Pressure	<input type="checkbox"/> Heart Trouble	<input type="checkbox"/> Seizures
<input type="checkbox"/> Low Blood Pressure	<input type="checkbox"/> Tuberculosis	<input type="checkbox"/> Epilepsy
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Leukemia	<input type="checkbox"/> Cancer
<input type="checkbox"/> Surgery	<input type="checkbox"/> Asthma	<input type="checkbox"/> Other (explain below)

Prescriptions: _____

Personal Data (Confidential) - Emergency/Medical/Insurance Form – Page 2

Insurance Information

Health Insurance Company: _____

Group# _____

Policy #: _____

Contact Person: _____ Phone #: (____) _____

Response Questions

The purpose of the following questions is for the leadership team to get to know you better. There are NO right answers; all we ask is that you respond to each question with honesty and detail to create a full picture of who you are. Please note that you do not need to be a Christian to participate in this trip, nor do you need any prior missions or service experience to participate. We simply would like to know more about your background to allow the team to prepare effectively in the coming months. Each question must be fully answered. **Please type your answers. Please email your responses to: missionsdirector@sharethelife.org.** Thank you!

Service/Mission Background

1. What other service/mission projects have you been involved with?
2. Tell us who you went with, when you went and what you did.

Faith/Spiritual Background

3. How would you describe your spiritual beliefs? Please include your views about God, people, etc.
4. What do you expect from God on this trip?

Team Information

5. Why do you want to be a part of this trip?
6. How do you expect to be challenged on this trip?
7. In what ways do you hope to grow through this trip?
8. What do you feel will be your greatest contribution to the team?
9. Name your top 3 fears and/or weaknesses pertaining to this trip.

Team Commitment & Covenant

Read the following statements, then please sign and date.

I realize that being a part of this team is a responsibility as well as a privilege. I realize that I will be expected to...

- Be committed to the team.
- Have a positive attitude in all circumstances.
- Be an ambassador of Jesus Christ and LifePointe Church as I serve.
- Obey the direction and leadership of the Team Leaders.
- Proactively serve the team and others during training/preparation, while in Mexico, and while on the road.
- Strive to be always sensitive to Mexican culture while in **Puerto Peñasco**.
- Complete all tasks and studies as directed by Team Leaders.
- Serve fully and to the best of my ability in any events I choose to participate in.

Thoughtfully complete this *entire* application and agree to participate fully in the preparation, the trip itself, and the follow-up for this trip.

I understand that if I choose to break this covenant, the leadership of Team Tijuana (should they deem it necessary) is authorized to send me home at my OWN expense at any point during the trip.

_____ (Participant's initials)

Participant _____
Print Name

Participant _____ Date _____
Signature

Received by _____ Date _____