



**WELL HOUSE**  
MISSIONS

**HONDURAS MISSION TEAM**  
**2017 APPLICATION**

## **The Scoop:**

Trip Coordinator: Allie Wallace – email: [wellhouseallie@gmail.com](mailto:wellhouseallie@gmail.com) phone: 443-340-1092 contact Allie for additional information or questions

Date of Trip: July 11-18, 2017

Total Cost: \$1650 (max) plus a couple of travel day meals

Who can join the team: Anyone ages 13 and up, (anyone who has not completed the 11<sup>th</sup> grade must be accompanied by parent/adult)

Deadline for Application & Deposit: All paperwork and a \$150 non-refundable deposit must be completed and turned in by February 26, 2017 to secure your spot. If your deposit is not turned in by this date, you will be dropped from the team.

### Payment Schedule:

You can pay by check, cash or online at [wellhousenorth.org/give](http://wellhousenorth.org/give) – select the Honduras Mission tab to pay

Payment of \$400 due by April 2nd

Payment of \$400 due by May 7th

Remainder of Balance due by June 4th

Fundraisers: TBA – We also strongly encourage letter writing to friends and family to help offset cost of trip. (see inside application for letter sample)

Host Organization: Honduras Hope & Casa de Esperanza Host: Matt & Nicole Fitzgerald, Terri Tindall

Accommodations: Dorm style rooms, bunk beds that include bedding (sheet and light blanket.) Bring an additional blanket if you get cold at night; it will be chilly. Each room has it's own sink, toilet, and shower. Towels are provided.

Clothing: Pack “work” clothing, things you don’t mind getting dirty. As well as casual attire. You MUST bring at least 1 pair of closed-toe shoes and long pants (for the landfill visit.) We also suggest a light jacket or hoodie for chilly nights. IF you would like, laundry is \$5 per bundle and takes 1 day to be returned.

Work Detail: Building wooden homes, distribution of food at local feeding center, visiting the city landfill, contributing to projects at Casa de Esperanza, VBS and building relationships with children and adults.

Medical Care: There are very good hospitals in close range for broken bones, etc. For anything serious, each person will have emergency fly out insurance... it takes you to the closest American hospital.

Food & Water: - Breakfast and dinner is provided daily and is delicious. All drinking water is bottled, even for Hondurans. Bring bottles for refilling or can buy bottled water there. You can bring packaged foods such as granola bars, beef jerky, etc. for lunch on work sites. Fresh, unpackaged stuff will not be allowed through customs.

General Packing List: Will be emailed to you upon applying for the trip.

## SHORT TERM MISSION TRIP APPLICATION

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Primary Phone#: \_\_\_\_\_ Best time to text/call: morning day  
night (circle those that apply)

Age: \_\_\_\_\_ (minimum age subject to trip requirements)

Email: \_\_\_\_\_

Date of birth:(m/d/yr) \_\_\_\_\_

Do you have a passport? \_\_\_\_\_ Expiration date: \_\_\_\_\_

If you do not have a passport, please begin the application process ASAP at  
this site: <https://travel.state.gov>

If yes, PASSPORT# \_\_\_\_\_

Provide name *as it appears on your passport*: \_\_\_\_\_

Emergency Contact Information

In case of emergency contact:

Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code : \_\_\_\_\_

Best Phone # to Contact: \_\_\_\_\_

Email: \_\_\_\_\_

MINISTRY INVOLVEMENT

Do you attend Well House church? ( )YES ( )NO

If not, how did you hear about the trip? \_\_\_\_\_

What ministries/areas of service/volunteerism are you presently involved in?

\_\_\_\_\_  
\_\_\_\_\_

Do you serve in a leadership position in any of these ministries? ( )YES

( )NO If yes, in which areas:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever participated in short-term missions? ( )YES ( )NO

If yes, Please give details:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you want to go on this trip? What are you hoping to gain from the experience? (Use back of this sheet to write answer)

Please indicate the activities that you are able and/or willing to do:

Media:  Journalism  Photography/Video  Computer Skills

Teaching:  VBS  Group Devotions  Preach  One-on-one teaching

Tech Skills:  Cook  Carpentry  Electrical  Plumbing  Paint

Electronics

Automotive  Other: \_\_\_\_\_

Group Activities:  Group Games  Puppets  Drama  Public Speaking

Lead Small Groups  Skits

Music:  Lead Singing  Sing  Play an instrument: \_\_\_\_\_

Other Gifted Ability: \_\_\_\_\_

## MEDICAL INFORMATION

### TO BE COMPLETED BY PARTICIPANT OR PARENT / GUARDIAN

Leader will take copy of this page on the trip to have available at all times.

Name of Participant: \_\_\_\_\_

Primary Doctor's Name:

\_\_\_\_\_

Doctor's Phone Number: \_\_\_\_\_

**BRIEFLY DESCRIBE ANY OF THE FOLLOWING THAT APPLIES:  
PLEASE NOTE THAT A DOCTOR'S RELEASE MAY BE REQUIRED TO  
PARTICIPATE IN THE TRIP**

Physical Disabilities:

Medications? List all medications and dosage:

Allergies:

Special Dietary Needs:

Is participant currently under the care of a physician? ( )YES If yes, please explain:

Physical challenges or limitations you may have:

Is trip leader authorized to approve medical treatment? ( )YES

( )NO

( )NO

Date of last tetanus shot: \_\_\_\_\_ (A current Tetanus is required. It must be within the last 10 yrs.) Additional vaccinations may be required as recommended by the CDC based on the trip location(s).

**MEDICAL INSURANCE DETAILS:**

(Medical insurance is required for trip by all participants and leaders)

Name of policyholder:

\_\_\_\_\_

Relationship to the participant:

\_\_\_\_\_ Name of Insurance

Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

## PARTICIPANT'S AGREEMENT

By signing below, the participant or the authorized guardian of the participant acknowledges, fully understands and agrees to the following:

- That participation on this short term mission trip is on a volunteer basis
- That I am receiving no financial compensation of any type for participating
- I accept the risk of possible personal injury or illness that may be associated with participation on this mission trip.
- I accept full financial responsibility for any injury or illness sustained during this mission trip.
- That all expenses associated with my participation in this trip are my responsibility. I understand that all costs for this trip are to be submitted in accordance with the required schedule of due dates established for this trip.
- I understand certain expenses such as the cost of airline tickets are not refundable if I should cancel this application after those expenses have been incurred.  
All the questions on this application have been answered truthfully and information provided is accurate.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

If participant is less than 18 years of age, a parent or guardian must complete and sign below.

*(Print Name of Parent or Guardian and Print Name of Participant)*

I \_\_\_\_\_ give my consent for \_\_\_\_\_ to participate on this trip with Well House Church.

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_



Dear \_\_\_\_\_:

I hope that God is doing as many wonderful things in you life as He is in mine. It has been a great year so far and I'm feeling God's will to do more for the world around me.

I want to share with you an exciting and challenging ministry opportunity that has been presented to me. From July 11- July 17 God has offered me the chance to go to Tegucigalpa, Honduras with my church, Well House Church. This 7-day missions trip will consist of building homes, conducting VBS, food distribution and spreading gospel to the Honduran people while also learning more about the people there and their culture.

While God has opened up a door for me to develop a greater heart of compassion for His people around the world, the exciting part is that you will be able to share in this compassion in several ways.

First, you can pray for my team and me. We will need prayers that God will prepare us for our visit and bless our efforts as we minister to the people of Honduras. We will also need prayers that our financial needs will be met. At this time we need to raise \$1,660 each to attend this trip, and that is quite a challenge!

Another way you can be involved is to help provide that financial support. Would you consider supporting me with a small donation? I have included a postage-paid envelope for you to use if you feel led to contribute. I will need to raise all my funds by June 1 in order to pay for airline tickets, building supplies and other things to be distributed while there. Please make checks payable to Well House Church. Whether you feel led to contribute financially, through prayer, or both, all of your support is appreciated.

I look forward to doing God's work in Honduras and letting you know all about how God has worked through this team when I return in August.

God Bless, YOUR NAME