ACEM (Missions Department)

Application for Short-Term / Mid-Term Missions

(Please submit completed forms to the ACEM Missions Department
at least **TWO** months prior to the commencement of the trip)

Short-Term / Mid-Term Missions Trip:

Recent Photo

Organized by: _____

Team Leader's Info: _____
(Name)

_____ _____
(Daytime phone no.) (e-mail)

Destination: _____
(city, country)

Date: from _____ to _____
dd/mm/yyyy dd/mm/yyyy

Estimated Costs(C$): Transportation_____ Others_____ TOTAL _____

Subsidy needed: Yes ☐ No ☐ Subsidy Amount Applied for: C$_____

This is my 1st ☐ 2nd ☐ 3rd (or more) ☐ time joining this STM to the **same** destination.

Personal Information:

Full Passport Name: (English) _____

(中文名) _____ e-mail: _____

Address: _____ City: _____ Postal Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Place of birth: _____ Date of birth: _____ Gender: __

Language and other dialects: _____

Church: _____ Fellowship: _____

Date of Baptism: _____ Baptized at: _____
(name of the church)

ACEM Church Membership: ☐ Yes ☐ No Member since _____ (Month, Year)

Occupation: _____

Passport Information:

Nationality: _____ Passport No: _____ Expiry Date: _____

Emergency Contact Information:

Full Name: _____ Relationship to you: _____

Address: _____ City: _____ Postal Code: _____

Telephone: (Home) _____ (Work) _____ (Cell) _____

Education Information:

High School ☐ College ☐ University ☐ Year: _____ Degree: _____

Others: _____

Please describe other skills and talents:

_____

_____

Short / Mid-term goal towards missionary service:

_____

_____

_____

Previous short-term missions experiences: (for the past 7 years)

Trip #	Date (mmm/yyyy)	Organized by	Destination
1.			
2.			
3.			
4.			

5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

Purpose of participating in this missions trip:

_____

_____

_____

Specific task of involvement(s) in this missions trip:

_____

_____

_____

_____

If the submission of this application is less than 30 days from the trip commenced date, please state the reasons for the belatedness.

_____

_____

_____

Important acknowledgement:

By signing this application,

1. I agree that obtaining **Emergency Hospital and Medical Insurance** with sufficient coverage covering the period of travel for myself is a pre-condition for ACEM's acceptance of my application for participation in this missions trip and that I have attached evidence of such insurance coverage to ACEM Missions Department with this application, failing which I shall be regarded as having withdrawn my application for participation in this missions trip.
   (Remark: If you need to purchase the insurance, the cost of the insurance is considered as part of the cost of the trip and is eligible for ACEM subsidy.)

2. I will attend to **pre-trip medical preparation**—inoculations and disease prevention medications. Such expenses are considered as part of the cost of the trip and are eligible for ACEM subsidy.

3. I have read and agreed to abide by the rules and regulations as stated in the **ACEM missions guidelines and policy** posted on ACEM website www.acem.ca. I have read and adhere to the **Tenets of Faith of ACEM**. Document is located in the following link: http://www.acem.ca/en/index.php?option=com_k2&view=item&layout=item&id=95&Itemid=34

4. I will **write a 1 to 2 pages reflection** with
   a. God's work that impacts my life most
   b. In what ways this missions trip meet or doesn't meet my expectation

   Submit the reflection to the leader in a week after return.

Signature of Applicant: _____ Date: _____

For leader/assistant leader:

1. Submit a **plan** to ACEM two weeks before leave
2. Contact the Ministry Director of ACEM for invitation of the ministry staff to attend one of the group meetings before leave for **prayers and support**
3. Submit **reflections** for your team including yours to ACEM two weeks after return

Past & Current General Ministry Experience/Involvement Record

Please check (√) all that applies to you below and write comments on your involvement.

Ministry	Have partici-pated	Have assisted in leading	Can Lead	Specifications: the kinds of training; nature of involvement and duration
EVANGELISM				
Community Outreach	☐	☐	☐	
Sports Outreach	☐	☐	☐	
Evangelistic Event	☐	☐	☐	
Evangelism/Missions Training	☐	☐	☐	
Church Planting	☐	☐	☐	
DISCIPLESHIP				
Discipleship Training	☐	☐	☐	
Mentorship/Internship	☐	☐	☐	
Sunday School	☐	☐	☐	
Children Ministry	☐	☐	☐	
Men's Ministry	☐	☐	☐	
Senior Ministry	☐	☐	☐	
Women's Ministry	☐	☐	☐	
Youth Ministry	☐	☐	☐	
Fellowships	☐	☐	☐	
Small Groups	☐	☐	☐	
CARING				
Visitation	☐	☐	☐	
Counselling	☐	☐	☐	
MUSIC				
Worship Team / Choir	☐	☐	☐	
STEWARDSHIP				
Board	☐	☐	☐	
OTHER Ministries				
	☐	☐	☐	
	☐	☐	☐	
	☐	☐	☐	
	☐	☐	☐	

Waiver

Short-term / Mid-term Missions Trip

Date of Trip: From _____ to _____
dd/mm/yyyy dd/mm/yyyy

Destination: _____ (the "Trip")

Name of Applicant: _____ (the "Applicant")

IN CONSIDERATION of **The Association of Christian Evangelical Ministries Canada's ("ACEM")** consideration of the Applicant's application for participation in the Trip (the receipt and sufficiency of which consideration are hereby expressly acknowledged), the Applicant hereby remises, releases and forever discharges ACEM, its affiliated churches and any respective directors, officers, agents, employees and representatives (collectively, the "Releasees") from all manner of actions, causes of action, suits, debts, duties, accounts, bonds, covenants, contracts, liens, liabilities, indemnities, claims, costs, demands and sums of money that may arise from the Applicant's participation in the Trip.

AND FOR THE SAID CONSIDERATION, the Applicant further agrees not to make any claim or take or continue or participate in any proceedings whether commenced or continue, either alone or with any other person or corporation, against any other person or corporation who might claim contribution or indemnity under the provisions of the *Negligence Act* and the amendments thereto or under any successor legislation thereto or under the *Courts of Justice Act* or the *Rules of Civil Procedure* from any of the Releasees with respect to the matters herein referred to and released. If the Applicant commences such an action, or take or maintain such proceedings, and any of the Releasees are sued, added as a main party or third party, or against whom claims for contribution or indemnity are made, the Applicant shall indemnify the Releasees for all settlement, judgment, awards of damages, costs, legal fees, disbursements and expenses arising out of said proceedings and will assume the conduct of the Releasees' defence to such proceedings or claims, which defence will be subject to the Releasees' approval of legal counsel selected for this purpose. This Waiver shall operate conclusively as an estoppel in the event of any claim, action, complaint or proceeding which might be brought in the future by the Applicant (or by others on behalf of the Applicant), for the Applicant or on behalf of others with respect to the matters covered by this Waiver. This Waiver may be pleaded accordingly, in the event any such claim, action, complaint or proceeding is brought, as a complete defence and reply, and may be relied upon in proceedings to dismiss the claim, action, complaint or proceedings on a summary basis and no objection will be raised by the Applicant in any subsequent action that the other parties in the subsequent action were not privy to formation of this Waiver.

The Applicant acknowledges and is fully aware of the risk involved in the participation of the Trip, and that notwithstanding same the Applicant is voluntarily proceeding with the undertaking and is assuming all the risk of injury, damage or loss to the Applicant and to the others in connection therewith.

The Applicant further acknowledges that:

1. the Applicant has been afforded an opportunity to obtain legal advice on the terms and conditions of this Waiver; and
2. the terms of this Waiver are fully understood and that this Waiver is given voluntarily by the Applicant.

_____ Date: _____
Signature of Applicant

For applicants UNDER the age of 18:

_____ Date: _____
Signature of Parent / Legal Guardian

Name of Parent/Legal Guardian: _____ Relationship: _____
(please print) father/ mother/ guardian

Contact Telephone No.: _____

Witness to ALL Signatures above:

_____ Date: _____
Signature of Witness

Name: _____
(please print)

APPLICANT CHECKLIST - check (√) the appropriate answer	Yes	No
Adequate insurance coverage	☐	☐
STM application – completed & signed - p.4	☐	☐
Waiver form:		
Applicant completed and signed - p.6	☐	☐
For applicant UNDER the age of 18, parent / legal guardian completed and signed - p.7	☐	☐
Witness to ALL signatures in the waiver form, completed and signed - p.7	☐	☐
Applicant UNDER 18 years old whose parent/legal guardian does NOT accompany him/her:		
STM Team Leader, Parent/Guardian Consent form – completed and signed – p.8	☐	☐
Parent/Guardian Letter of Consent for Immigration Cross Border Purpose - p.8	☐	☐
Recommendation form – given to the Ministry Leader/Pastor – p.9	☐	☐
Pre-existing Medical Information – p.11	☐	☐

**** To be completed by the parent/legal guardian AND short-term missions team leader when the parent/legal guardian does NOT go with the minor (who is of the age between 14-17) to the short-term missions field*****

Leader Acknowledgement Form

Date of Short-Term Missions Trip: From _____ (DD/MM/YYYY) to

_____ (DD/MM/YYYY) (the "Trip")

Destination: _____

I, _____, leader of the Trip

acknowledge that team member _____ (name of child) is a minor (under 18) and he/she will be under my supervision and responsibility and I hereby agree to provide care and protection to ensure his/her safety and wellbeing during the Trip.

_____ _____

Signed Date

Parental/Legal Guardian's Consent Form

I, _____, the parent/legal guardian of my minor child _____ (name of child) who is under age 18, hereby appoint the leader, _____, as my child's guardian during the Trip.

_____ _____

Signed Date

NOTE TO APPLICANT: Please forward your completed Application Form, Waiver of Responsibility, and if applicable, the signed Leader Acknowledgement Form and Parental/Legal Guardian's Consent Form with a copy of the Short-Term Missions Recommendation Form, to Leader or Pastor of your church for recommendation.

Short-Term / Mid-Term Missions Recommendation Form

If the applicant is 8-13, he or she must be accompanied by his / her parent(s) or guardian(s) who meets the Applicant Qualifications as indicated in our Missions Policy. His or her recommendation must be done by:

1. Children Pastor or Sunday School Teacher who knows the child and
2. On a separate letter, the Team leader specifies how the applicant may contribute in the team

Name of Applicant: _____

Ministry Leader/Pastor providing recommendation:

Name: _____ **Position at Church**: _____

1. How long have you known the applicant and under what circumstances?

   _____

2. If the applicant is of the age of 8-13, is he or she accompanied by parent(s) or guardian(s) who meets the Applicant Qualifications as indicated in ACEM Missions Policy?

   Yes ☐ **No** ☐ **(Please check)**

   [Note to Ministry Leader/Pastor: if the answer to question no. 2 is No, then the applicant will be disqualified from participating in this trip.]

3. Please evaluate the applicant in the following areas:

	(1 = low, 5 = high)					Comments
Humility	1☐	2☐	3☐	4☐	5☐	_____
Servanthood	1☐	2☐	3☐	4☐	5☐	_____
Leadership	1☐	2☐	3☐	4☐	5☐	_____
Teachability	1☐	2☐	3☐	4☐	5☐	_____
Maturity	1☐	2☐	3☐	4☐	5☐	_____
Faithfulness	1☐	2☐	3☐	4☐	5☐	_____
Team Spirit	1☐	2☐	3☐	4☐	5☐	_____

4. Do you recommend the applicant for this trip? Yes☐ No☐

   If you **do not** recommend, please provide reasons and suggestions as to how the applicant can prepare for future short-term missions.

_____

_____ Date: _____

Signature of Ministry Leader/Pastor providing recommendation

_____ Date: _____

Signature of Pastor/Leading Pastor (if different from above)

NOTE TO MINISTRY LEADER/PASTOR: Please forward the completed Recommendation Form, together with the Application Form, Waiver of Responsibility and if applicable, the signed Leader Acknowledgement Form and Parental/Legal Guardian's Consent Form, directly to ACEM Missions Department.

FOR ACEM OFFICE USE ONLY:

Application Package received on: _____ By: _____

	Costs C$	Subsidy %	Subsidy Amount C$
Transportation			
Others			
TOTAL			

CHECKLIST	Yes	No
If Applicant is of the age of 8-13, is he or she accompanied by parent(s) or guardian(s) who meets the Applicant Qualifications as indicated in ACEM Missions Policy?	☐	☐
Has Applicant submitted satisfactory evidence of insurance coverage?	☐	☐
Application form – completed & signed	☐	☐
Waiver form – completed and signed	☐	☐
STM Team Leader, Parent/Guardian Consent form – completed and signed	☐	☐
Parent/Guardian Letter of Consent for Immigration Cross Border Purpose (under 18 years old, not accompanied by parent / guardian)	☐	☐
Recommendation form – completed and signed	☐	☐
FOLLOW UP:		
Tentative plan submitted by Team Leader	☐	☐
Reflection submitted	☐	☐

Reviewed & Completed by:

Name: _____

Signed: _____ **Date: _____**
(please print)

Effective Date: All mission trips after January, 2017

Pre-existing Medical Information:

(This medical information needs to be disclosed to the Team Leader and ACEM Administrator prior to the commencement of the trip. This information will be shredded after completion of the trip.)

Specify Pre-existing medical conditions, e.g. illness that relates to regular drugs taking, allergy:

_____

_____

_____

_____

_____