

MISSOURI MISSION TRIP
Application Presbytery of Detroit
May 5, 2012 to May 12, 2012
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Volunteer's Name: _____



**PRESBYTERIAN
DISASTER ASSISTANCE**

Leave for Joplin, MO: May 5, 2012
5 Work Days: May 7, 2012 to May 11, 2012
Leave for Detroit: May 12, 2012

TO BOOK YOUR TRIP First Come, First Reservations:

- *** Volunteers must be older than 18 years of age.
- *** MUST HAVE OWN HEALTH INSURANCE.

- 1. Contact Us:** Mary Lloyd 313-247-0792 or hands-on-mission@detroitpresbytery.org or 313-586-0088 (fax).
- 2. Cost:** \$196 per person. Please pay in advance, the fee is refundable until April 28, 2012.
- 3. Completed Application with Check Return To:** Mary Lloyd, % Missouri Mission Trip, 105 Tuxedo Ave.; Highland Park, MI. 48203-3544. **Send as soon as possible.** Checks Payable To: **Presbytery of Detroit.**
- 4. Acceptance:** You will receive an email confirmation.
- 5. Orientation Meeting:** April 22, 2012 at 4:00 pm is scheduled and location details will be provided to you before the meeting. Your attendance is requested at this meeting.
- 6. Lodging rooms to & from Joplin: "are" included in the application fee.**
- 7. Travel:** Car Pools are expected and available (vans and cars work best). You may travel by air if you wish.

Name: Last _____ First _____ Nick _____

Address _____ City _____ MI. Zip _____ Gender _____

E-Mail Address _____ Birth Date _____

Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact Information: Name _____ Relationship _____

Home Phone _____ Work Phone _____ Cell Phone _____

Why do you want to go on trip? _____

Please indicate if you would you be willing to serve as part of the leadership team in any of the following areas:

- ____ 1. Healthcare/Medical Manager
- ____ 2. Kitchen Manager
- ____ 3. Supply Runner
- ____ 4. Communication/Documentation (journaling, photography, CD/DVD creation, etc.). What kind of photography and/or computer equipment will you be bringing? _____

Please describe any dietary restrictions _____

Are you planning on driving your vehicle? (Assume it will be used to go to worksites). If yes, what is the make/model? _____
License Plate Number: _____

And how many people can you take (including yourself) with luggage: _____

Yes ___ No ___ You may use my image taken during this mission trip by Presbytery & HOM Work Group.

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Hotel rooms to and from Joplin are arranged by mission team and included in your application fee.

Lodging provided by First Presbyterian Church (502 South Pearl Avenue, Joplin, MO 64801).

If you are traveling with a group and/or your spouse, please indicate the name of at least one person with whom you would like to share a room. _____

Skills Assessment

- Under "Age Range", please indicate the appropriate age range:
= under 18, A = under 25, B = 26 – 35, C = 36 – 45, D = 46 – 55, E = 56 – 65, F = Over 65
- For each Skillset, please specify any and all skills you possess according to the following levels:
1 = willing helper, 2 = Do it yourselfer, 3 = Extensive handyperson, 4 = Worked trade previously, 5 = Working in trade currently, 6 = licensed

First Name	Gender	Age	Lead work crew? (y/n)	Debris Removal	Heavy Lifting	Foundation	Tear out drywall, floors	Framing Carpentry	Finish Carpentry	Electrical	Plumbing	HVAC	Insulation	Drywall Hanging	Drywall Finishing	Siding	Window Installation	Door Installation	Cabinet Installation	Flooring: vinyl, etc.	Tile: ceramic, etc.	Mason: brick/plaster	Priming/Painting	Landscaping

Are there other skills/abilities/experience you would like to let the leadership know about?

LIABILITY RELEASE: I have carefully read and fully understand its contents.

I have been fairly and honestly informed that risks and dangers are inherent in mission hands-on trip activities and that reasonable care, caution, instruction, supervision and expertise cannot eliminate hazardous exposure. I further understand that injuries, minor and severe, are common and ordinary occurrences during disaster assistance work. I release the Presbytery of Detroit its agents, officers, employees, directors, of any and all legal liability for any injury or death or loss/damage to property caused by or resulting from participation in this trip, regardless whether or not such injury, death or loss/damages to property was caused by their negligence or from any other cause or causes. I further understand that medical insurance is required and is the responsibility of each participant to cover any and all medical requirements and expenses.

I waive any claim caused by or resulting from any failure to follow instructions

I understand and agree that this Application – including the Liability Release -- will be interpreted under the laws of the State of Michigan.

DO NOT SIGN THIS AGREEMENT IF YOU DO NOT UNDERSTAND IT OR IF YOU DO NOT AGREE WITH ITS TERMS.

Trip participant signature _____ Date _____

Church affiliation: In order to ensure a positive, cohesive group, please list your church and phone number.

Church Name _____ Phone _____

Address _____ City/State/Zip _____

Volunteer's Name: _____

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Presbytery of Detroit

Joplin Outbound Mission Trip

Supplemental Medical Information Form

**(TO BE KEPT WITH TRIP NURSE ALONG WITH A COPY OF PAGE 2 OF PRESBYTERIAN
DISASTER ASSISTANCE - GENERAL RELEASE, INDEMNIFICATION AGREEMENT AND
AUTHORIZATION FOR MEDICAL TREATMENT)**

PURPOSE: This form is not intended to invade your privacy. Its sole purpose is to alert the Trip Leader and medical providers to any condition that might assist in your care in an emergency medical situation. All information on this form will be kept confidential and the form will be kept on file at the presbytery offices at the conclusion of the trip.

Participant name: _____ Date of Birth: _____

Church _____

Emergency Contact:

Address: _____

City/State/Zip: _____

Do you have any physical conditions that could be a health/safety factor at any time during this trip? No _____

Yes _____ If yes, please describe: _____

Are you presently taking prescription medication for any condition described above?

No _____

Yes _____ If yes, please list: _____

Name of primary insurance holder: _____

**Please bring your medical card with you **

I submit this form and attest that the information is true and correct.

Signature

Date

GENERAL RELEASE AND INDEMNIFICATION AGREEMENT

Participant name: _____ (“Participant”)

DOB: _____

Home Address: _____

City/State/Zip: _____

Telephone: (Cell) _____ (Day/Evening) _____

The undersigned, in consideration of the housing, services, food, and the like provided by the First Presbyterian Church of Joplin, hereby understands and agrees that the First Presbyterian Church of Joplin and its staff, its members, its volunteers, its pastor, its elders, deacons, representatives, successors, assigns, and entities (hereinafter “FPC”), will not be responsible in any way whatsoever for any loss, damage, or any injury of any kind or in any manner resulting from or in connection with my use of premises owned by the First Presbyterian Church of Joplin.

Those premises include the church building located at 509 Pearl in Joplin, Missouri, the building at 502 Pearl located in Joplin, Missouri, and the camp located approximately twenty-five miles east of Joplin known as ShoalKirk.

I understand that FPC does not and cannot guarantee my safety in connection with my use of the premises. I accept and assume all responsibility for all risks which may occur during, in connection with, or which may result from my use of the premises listed above.

With the above in mind and by my signature below, I fully understand, agree and hereby voluntarily release and forever discharge FPC for any accident, loss, death, injury or damage to myself or my property, in connection with my use of any of the premises owned by the First Presbyterian Church of Joplin. I do hereby further agree to indemnify and hold FPC harmless against any and all liabilities, damages, claims, actions or rights of action, suits, judgments and associated costs and expenses of whatsoever kind in connection with my use of the facilities described above. I make this agreement on behalf of my heirs, agents, fiduciaries, successors and assigns. I waive, knowingly and voluntarily, each and every claim or right of action I now have or may have in the future against FPC related to my use of the premises described above, even if such claim or right of action is caused by the alleged neglect of FPC. This document does not release FPC from liability which may arise as a result of gross negligence.

My signature below indicates that I have read this document, understand it completely, and agree to be bound by its terms.

Signature of Participant: _____

Date: _____

Signature of Witness: _____

Date: _____

All participants under the age of 18 must have the signature of a parent or legal guardian.

Signature of Parent/Legal Guardian (if applicable): _____

Signature of Witness: _____

Date: _____

Volunteer's Name: _____

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INDIVIDUAL VOLUNTEER THINGS TO BRING LIST
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Bedding

- Sleeping bag
- Flat sheets
- Pillow
- Flashlight and extra batteries

Clothing

- Socks and undergarments
- Heavy work boots (**steel-toe shoes highly recommended**)
- Rain gear
- Hat, visor, bandana and /or sweatband
- T-shirts or work shirts
- Long-sleeve shirts
- Jeans or pants and shorts
- Pajamas
- Shower shoes and robe
- Hat, visor and bandana

Toiletries

- Toothbrush/toothpaste
- Soap/shampoo
- Wet wipes
- Deodorant
- Medication for length of stay
- Sunscreen
- Insect repellent
- Razor/shaving cream (electricity may not be available)

Miscellaneous

- Bible
- Travel clock
- Fanny pack/backpack
- Spending money
- Water bottle container
- Water during Trip
- Safety & Sun Glasses
- Face Mask (N95)
- Cotton & Leather Work Gloves

Personal Items

- Towels/washcloths
- Car chargers for electronic equipment
- Ear plugs (if light sleeper)

What Not to Bring

- RVs and campers (PDA cannot guarantee that there will be hookups, or even parking space for these large vehicles)
- Tents
- Alcohol
- Weapons or fireworks
- Smoking is not allowed within our facilities

***It is highly recommended that every volunteer have a current tetanus shot.**

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First Presbyterian Church of Joplin, MO.

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First Presbyterian Church

509 Pearl

Host Building for Lodging

502 Pearl

Joplin, MO. 64801

They will provide:

- Air conditioned building
- A limited number of mattresses and air mattresses are currently available
- Thirty twin bed frames with mattresses are available
- A full kitchen with appliances and cooking and eating utensils
the kitchen has no food.
- An evening fellowship meal will be provided once a week
- Dining area with seating for 40
- Two large sleeping rooms and two small sleeping rooms
- Two refrigerators and one chest freezer
- Large water coolers from which you can fill water bottles
- Ice Maker
- Washer & dryer with detergent
- Toilet tissue, paper towels & cleaning supplies
- Four showers with bath towels and mats, which are laundered every day
- Free wireless Internet
- Weather radio
- Entertainment – TV, ping pong, foosball, pool table & outdoor basketball

Lodging cost is covered by your application fee and paid to First Presbyterian Church of Joplin by the Presbytery of Detroit.