

# Application for Short-Term Mission

Austin Samaritans  
Nicaragua, May 10 - 17, 2014

Please return all four pages of this application with your deposit to Austin Samaritans at:  
P.O. Box 161074, Austin, TX 78716 or e-mail to [info@austinsamaritans.org](mailto:info@austinsamaritans.org).

**Please note that this application consists of four pages.**

## **Participant Information**

Name as It Appears on Passport: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Shirt Size: S M L XL

Date of Birth: \_\_\_\_\_ Church Affiliation \_\_\_\_\_

Passport Number: \_\_\_\_\_ Passport Expiration Date: \_\_\_\_\_

Please attach a copy of the photo page of your passport with this application  
(To enter Nicaragua your passport must be at least six months from expiration)

Please identify any previous mission trips or crosscultural experiences.  
(Previous experience is not required to participate in this trip.)

Why are you interested in going on this particular short-term mission trip?

Briefly indicate your personal goals for this trip.

Do you have any physical, emotional, or dietary restrictions that need accommodation?

Do you have any serious allergies?

## **Emergency Contact:**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

# Trip Cost

Trip cost is \$600.00 plus airfare and trip/health insurance. You need to purchase your own airline ticket and trip/health insurance. The trip fee covers all lodging, meals, and ground transportation in Nicaragua and trip support expenses. Incidental purchases and shopping are not included.

Medical travel insurance is required and can be purchased in conjunction with your airline ticket.

A \$200.00 deposit is required with this application. Verification of Insurance and final payment is required two weeks prior to departure.

Make checks payable to:  
Austin Samaritans

On memo line note:  
May 10--17, 2014 Trip

Send checks to:  
Austin Samaritans  
PO Box 161074  
Austin, Texas 78716

## Team Trip Itinerary

### DEPARTURE

Depart: <b>4:00 p.m.</b> <b>Sat., May 10, 2014</b> Austin, TX (AUS)	Arrive: <b>4:55 p.m.</b> <b>Sat., May 10, 2014</b> Houston, TX (IAH - Intercontinental)		Flight: <b>UA4972</b>
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**Change Planes.** Connect time in Houston, TX (IAH - Intercontinental) is 1 hours 15 minutes.

Depart: <b>6:10 p.m.</b> <b>Sat., May 10, 2014</b> Houston, TX (IAH - Intercontinental)	Arrive: <b>8:37 p.m.</b> <b>Sat., May 10, 2014</b> Managua, Nicaragua (MGA)	Total Miles: <b>1,503</b>	Flight: <b>UA1421</b>
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### RETURN

Depart: <b>12:20 p.m.</b> <b>Sat., May 17, 2014</b> Managua, Nicaragua (MGA)	Arrive: <b>4:50 p.m.</b> <b>Sat., May 17, 2014</b> Houston, TX (IAH - Intercontinental)		Flight: <b>UA1433</b>
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**Change Planes.** Connect time in Houston, TX (IAH - Intercontinental) is 2 hours 25 minutes.

Depart: <b>7:15 p.m.</b> <b>Sat., May 17, 2014</b> Houston, TX (IAH - Intercontinental)	Arrive: <b>8:02 p.m.</b> <b>Sat., May 17, 2014</b> Austin, TX (AUS)	Total Miles: <b>1,503</b>	Flight: <b>UA1233</b>
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## Assumption of Risk and Release from Liability and Agreement

I have voluntarily applied to join a team sponsored by Austin Samaritans traveling to Nicaragua during May 2014. In consideration of the sponsorship of this trip by Austin Samaritans, I hereby agree as follows:

I understand that there are certain risks involved in participation in relief development and mission trips that could potentially cause harm to the participants. These risks may include, but are not limited to air, land, and sea travel on vehicles that do not have the same safety features to which I am accustomed; exposure to germs and diseases in food and otherwise; interaction with people and cultures that have different health standards than those to which I am accustomed; higher incidences of crime; injuries incurred while performing physical tasks of relief and development; and political acts of terrorism.

I acknowledge that the stress of living in camp-like conditions and accommodations without access to many, or most, modern conveniences can cause fatigue and stress which may render participants more susceptible to contracting illness. Medical facilities available in the event of an emergency or illness may be below the standards to which I am accustomed or may not be available at all.

I accept all risks of injury, illness, or death during this trip from any cause and waive any claim that could be made against Austin Samaritans, its officers and/or volunteers for damages to property or injury, illness or death, which arise out of or relate in any way to my participation in the relief, development or mission trips sponsored by Austin Samaritans.

I, on my own behalf and on behalf of my heirs, assignees and legal representatives hereby release Austin Samaritans, its board, officers, employees and representatives and each of them, as well as volunteers, with whom I might be traveling and working, from any and all claims, actions or demands I might or could potentially make arising from or relating to any injury or damage I suffer during this trip.

I represent that I have sought, or decided in my sole discretion not to seek, medical advice on the necessity of inoculations or other health related matters concerning this trip and that Austin Samaritans, its officers and/or volunteers have given no advice in this regard except to seek medical advice as I see fit.

I further acknowledge that Austin Samaritans, its officers and/or volunteers are neither authorized by me, nor willing to make medical decisions on my behalf should I become incapacitated for any reason. I acknowledge that I have been advised by Austin Samaritans to make appropriate arrangements, if desired, to empower a designated person or persons to make medical decisions on my behalf in the event of my incapacitation.

I agree to observe all Austin Samaritans travel rules and acknowledge by my signature below that I received a copy of any rules with respect to the trip described above. I agree to comply with all instructions of Austin Samaritans' group leaders. In the event that Austin Samaritans' group leader determines in his or her sole discretion that it is necessary to terminate my participation in the trip. I agree to do so. I also understand that any activity taken outside the normal dates or scheduled activities for this Austin Samaritans' sponsored trip will be entirely at my own risk.

I expressly agree that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Texas, and that this Agreement will be construed, interpreted and governed by the laws of the State of Texas, and that this Agreement shall be binding upon me, my heirs, assignees and legal representatives.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

## CONDUCT AND DRESS CODE

*"We put no stumbling block in anyone's path so that our ministry will not be discredited."* 2 Corinthians 6:3

It needs to be understood that, since mission team members are highly visible in the communities, a member's actions can either help or harm the Lord's work in Nicaragua. There are community and church norms, as well as safety measures, that must be observed at all times while in Nicaragua. These norms may be more modest than in the United States. **You are a guest in Nicaragua and will defer to our mission hosts and group leaders in all matters of behavior, dress, and activities. Please consider whether you are willing to be in total compliance before you sign this document.** Failure to comply with these rules may result in a team member's participation in the ministry being terminated and the team member being required to return home at the soonest feasible time.

### CONDUCT

**No use of profanity, alcohol, or other drugs, at any time, while in Nicaragua.**

Disruptive, inconsiderate, or abusive behavior toward other team member or hosts will not be tolerated.

### SAFETY

Leave expensive jewelry and electronic items at home.

Stay inside the guesthouse after sunset, unless with the group for an activity.

Never go anywhere alone or without the permission of the leader.

### DRESS

Remember mission team members represent the ministry in Nicaragua.

Dress should be modest for men and women. Guidance on appropriate dress for this trip includes the following:

Shorts must have a 7-inch inseam, as measured along the inside leg seam.

Women must wear bras, and the bra may not show outside clothing.

No underwear may be showing for men or women.

No see-through clothing.

No low necklines on women.

No cropped shirts or blouses, halter-tops, or low-riding pants/skirts.

No belly buttons or midriffs showing at any time.

No facial piercings.

No outlandish hairstyles or colors.

Swimsuits for females must be modest and one piece.

Swim suits for males must be modest and boxer style.

Modesty of dress is a requirement of being a part of this mission team.

Parents & adults responsible for a teen are expected to supervise the attire and conduct of their teen at all times.

**I have read the rules as listed above, and agree to follow these rules, and any others, as directed by leadership.** I understand that the penalty for not following these codes may include any, or all, of the following:

Immediate expulsion from housing and participation in ministry.

If a minor, my parents will be contacted, and I will be put on the next flight home, at my parents' expense.

Refusal to allow individual, group, and/or leader to participate in future mission trips.

X \_\_\_\_\_

Signature of applicant

If under 18, signature of parent/guardian

Date