



Mission Trip Application

Mail this completed application to: HARDICH Mission Teams: 167 E 124TH Street Room 555,
New York, N.Y 10035. Tel (347) 777-8224

“ PLEASE PRINT “

Haitian Mission trip date ----- To -----

Your name ----- Age -----

Male ----- Female -----

Mailing address----- City -----

State ----- Zip-----

Phone (Home)----- Cell ----- work -----

Marital status ----- Married -----Single -----divorced-----

Occupation ----- Emergency contact -----Cell phone -----

Relationship to you ----- Emergency contact's email-----

If you attend church, where ----- your pastor's name & Phone Number -----

I understand that during my one week in Haiti, my ground transportation lodging and food at mission house, and staffing costs (i.e. interpreters, airport tips, drivers, cooks etc...) are included in my payment of \$500.00.

I agree that I will be responsible to cover all additional costs such as souvenirs purchased, telephone calls, plus damages to vehicles or properties. I will honor all promises or commitments I make to the Haitian people.

I agree to submit to my group leader and follow all rules and regulation or it will be arranged for me to be sent home early and I will be responsible for all expenses (i.e.cost of flight change to be

paid to airline, plus additional cost of \$150 US for a ride to PAP airport or any emergency service expenses).

I agree that I will not smoke, drink alcohol or use coarse language during my short term mission to Haiti or Dominican Republic.

I am aware that I am travelling **at my own risk** to a country which is politically unstable. I will in no event hold Haiti or Dom. Rep. mission responsible for any injuries, theft, disasters or accidents.

I have been advised not to give out personal information such as my phone number or address while I am visiting Haiti or the Dom. Rep.

I understand that it is encouraged to build new and lasting relationship with the Haitian or Dominican people; however, dating is not permitted and in doing so my trip will be terminated.

I am aware and agree that I have to be sent home early for any reason I will assume all responsibility for additional costs incurred.

If I am under 18 years of age, I am traveling with a legal guardian who assumes all responsibility for me.

Signature of Guardian -----

Signature of Applicant- -----

APPLICANT INTERVIEW FORM

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Name----- Group leader -----

Occupation ----- Age ----- Gender-----

Home Church----- Pastor’s name -----

My talents or Special interests are : -----

Have you been on previous Mission Trips and if so please list the countries visited and describe
your overall experience: -----

What made you decide to go to Haiti or the Dom. Rep. and what are your trip expectations :-----

Please describe your relationships to God and state how long you have been saved : -----

