

Please note: applications and deposits for the April 24-May 5, 2009 trip are due January 5, 2009. Final payment is due February 9.



Light To Israel
P.O. Box 340, Marshall, VA 20116
Tel: (540) 364-1103 Fax: (540) 364-1509
E-mail: Info@LightToIsrael.com
Web Site: www.LightToIsrael.com

SHORT-TERM MISSIONS APPLICATION

“Light to Israel Tour”

Information required for international travel:

Name (as it appears on your passport) _____

Address _____

City _____ State _____ Zip _____

Daytime Phone () _____ Evening Phone () _____

Email Address _____ Date of birth _____

Nationality _____ Gender _____

Passport Number _____ Expiration Date _____

Please include a photocopy of the inside cover of your passport with the application.

If you don't have a current passport, apply and mail photocopy as soon as possible.

Contact person not traveling with you in case of an emergency:

Name _____ Phone () _____

Address _____

City, State, Zip _____

Relationship to you _____

For which tour dates are you applying _____

Please choose one of the following room arrangements:

I expect to room with _____

I would like a single room (Single supplement adds approximately \$795.00). _____

I would like you to place me with an available roommate if possible. * _____

*In the event no roommate is available, there may be an extra charge.

The following information will be kept under strictest confidence but is needed to see if you can handle the rigors of our ministry tour plus best use your gifts and talents.

Medical Information

Use reverse side of sheet if necessary for explanation.

1. Have you had any major illness in the past year? No _____ Yes (please explain) _____

2. Do you take any medication regularly? No _____ Yes (please give type and dosage) _____

3. Do you have any allergies? No _____ Yes (please explain) _____

4. Is your tetanus shot current? No _____ (when will it be updated?) _____ Yes _____

5. Have you been immunized for Hepatitis A? (Suggested for travel outside the US) No _____ Yes _____

6. Do you have any physical limitations/disabilities? No _____ Yes (please explain) _____

7. Have you been hospitalized or treated for a mental or emotional condition in the last 5 years? No _____
Yes (please explain) _____

8. Do you have adequate medical insurance which will cover you outside the US? No _____ Yes _____
It is very strongly recommended that you obtain such insurance if you do not have it.
 - a. What is the name of your medical insurance company? _____

 - b. What is your policy number? _____

Background Information

1. What contact have you had with racial, ethnic or cultural groups other than your own?
2. Have you traveled outside the US? No _____ Yes (please specify countries) _____
3. Briefly describe your relationship with Jesus Christ. (Use back of sheet if necessary.)
4. Briefly describe your ministries in the church. (Use back of sheet if necessary.)
5. Briefly state why you want to go on this trip.
6. What previous mission experiences have you participated in (When? Where? With whom?)
7. What can you contribute by way of talents, skills and/or spiritual gifts? (Be specific)
8. What is your current employment?
9. What are your hobbies?
10. Do you have any first aid training? No _____ Yes (please explain) _____
11. Please list 2 people who know you and would serve as a reference for you. Include your pastor or a spiritual authority.

Name:

Phone:

Doctrinal Information

The doctrinal position of Middle East Ministries is expressed in the following statement of faith.

We believe...

...the Bible is the inspired and only infallible and authoritative Word of God.

...there is one God, eternally existent in three persons: God the father, God the Son, and God the Holy Spirit.

...in the deity of the Lord Jesus, our Messiah; His virgin birth; His full humanity; His sinless life; His death as the penal substitutionary atonement for sinners; His bodily resurrection; His present reign at the Father's right hand; His future physical and visible second coming to earth.

...in the universal sinfulness of mankind and justification by grace through faith alone, solely on the basis of the finished work of Jesus our Messiah.

...in the deity and personality of the Holy Spirit; in his work of bearing witness to Messiah Jesus; in His work of convicting of sin; of giving the new birth, baptizing every believer into the body of Messiah; of sovereignly giving spiritual gifts; and of sanctifying believers, producing in them the fruit of the Spirit.

...in the resurrection of both the saved and the lost, the one to everlasting life and the other to everlasting damnation.

Do you agree with the above statement of faith? Yes -----No -----

Additional Information

Please provide any additional information you would like us to know. (Use back of sheet if necessary.)

Signed _____ Date: _____

Please mail to Light To Israel, PO Box 340, Marshall, VA 20115 with your \$300.00 deposit. Thank you.