

APPLICATION FOR FINANCIAL ASSISTANCE FOR A MISSION TRIP

Germantown Baptist Church

After completing this form, please return it to Missions and Ministries Office, c/o Germantown Baptist Church, 9450 Poplar Avenue, Germantown, TN 38139 or fax it to the Missions Office at 901-260-5775.

Today's Date _____
Name _____ Date of Birth _____
Phone: (Day) _____ (Night) _____
Address _____
_____ ZIP _____ Email _____

FOR OFFICE USE ONLY:

☑ Approved \$ _____
☑ Not approved

• Mission Trip Expense Request:

Total cost of mission trip: \$ _____ Trip dates: _____ Funds needed by what date: _____

If not a GBC project, where should the monies be sent? _____

Please attach a copy of your support letter and a list of 10-25 people that you have contacted for prayer and financial support.

• Are you a current or previous member of GBC? Yes _____ How long? Years _____ Months _____
No _____

Please provide the name(s) of GBC members and/or references associated with GBC and how we may contact them.

Name _____ Phone _____ Name _____ Phone _____

Name _____ Phone _____ Name _____ Phone _____

• Is this project sponsored by Germantown Baptist Church? Yes _____ No _____

If not a GBC project, please provide the name of a Christian organization that you or this project is affiliated with, along with a contact name and daytime phone number:

Organization _____ Phone _____

Contact person _____ Phone _____

• Describe your mission trip: _____

Describe the cross-cultural witness you will be doing: _____

Which un-reached, un-evangelized, or un-churched peoples will be impacted by your ministry? _____

What city: _____ What nation: _____

Is the church persecuted for the practice of Christian faith in this area? Yes _____ No _____

• What relevant experience and/or training has prepared you for this mission project?

• Have you ever received financial support from GBC for a mission trip? Yes _____ When? _____ No _____

Please complete other side.....

