



UMVIM Team Member Application

The mission trip team leader will not share this information except as required and related to the mission trip (e.g. to treat a medical condition).

LOCATION of PROJECT: Costa Rica

PROJECT DATES: 3/14/26 – 3/21/26 **EXPECTED COST:** \$ 1,800 (plus \$350 personal*)

Name: _____ **Home Phone:** _____

Mailing Address: _____ **Work Phone:** _____

City, State, Zip: _____ **Cell Phone:** _____

Age: _____ **Email address:** _____

Occupation: _____ **Hobbies/interests:** _____

Languages (Proficiency Level):

Construction/Healthcare Specialties:

Missions experience & location:

Name of Church: McAllen First United Methodist Church **Pastor:** Rev. Jon Herrin

Church Address: 4200 N McColl Rd, McAllen TX 78504 **Pastor's Phone:** (956)686-3784

Type and Date of Safe Sanctuaries Certification: Trusted con Confianza

1. Why do you wish to participate? (Please use separate page if needed.)
2. Have you traveled to a developing country? _____ Which countries? _____
3. Please indicate your state of physical and emotional health (the project and trip will include rigorous activity and the hours may be long). Is there anything the team leader(s) should know regarding your health (allergies, diet, etc.)?



UMVIM Team Member Application (continued)

4. Do you have the Trusted con Confianza Training Certification ? ____Yes ____No

5. Please circle all applicable skills below and explain in detail where appropriate:

- Building/carpentry/masonry skills: Fair Good Excellent Professional

Other: _____

- Health Care: Physician Nurse Dentist First Aid training CPR training

- Other: _____

- Teaching Health Care (be specific) _____

- Other: _____

- Working with Youth: Recreation Storytelling Art Singing Crafts Other

- Preaching Devotionals Leading in prayer

- Photography (explain)

- Keeping and publishing a team trip journal (explain)

- Giving post-trip talks and slide presentations (elaborate)

- Other skills and abilities that will contribute to the team experience: _____

I am committed to helping with FUNDRAISING ACTIVITIES which will assist *everyone* equally in paying for their portion of the mission and for personally paying for any remainder of my mission trip amount/cost (\$1,800+ personal costs, each). I agree to adhere to the Team Timeline (see attached).

I understand that team members must be cheerful, cooperative, flexible, and patient. I agree to cooperate with the team leader(s) concerning our life together, including daily assignments, food, lodging, and transportation and any other activities involving the team as a whole. I agree to stay with the team from the beginning to end of the trip (except as excused by the team leader), to abstain from the use of alcohol and tobacco while on the mission trip, and generally to behave in a Christian manner.

Applicant's Signature

Date



Participant's NAME: _____

To Be Completed by the Applicant's Pastor (Optional):

I believe that the above applicant is a dedicated Christian, a team player, and a friendly, flexible person who will make a valuable contribution to this mission team. I am / am not personally acquainted with the applicant and recommend her/him for volunteer mission service. You may contact me for additional information if needed.

Pastor's Signature

Date