



Missionary Assistant Application

Thank you for your interest in being a Missionary Assistant with Journey Missions. Please complete and return this form and a recent photo to Jon Nelson at: Journey Missions, 3110 East Medicine Lake Blvd, Plymouth, MN 55441 or jon.nelson@afmc.org.

Missionary Assistant to: _____

Personal Information

Full Name: _____ (First) (Middle) (Last)

Address: _____ (Street) (City, State) (Zip)

Phone: _____ Email: _____

Are you over 18: _____ Citizen of (Country) Birthplace: _____

Passport number: _____ Issue Date: _____ Expiration Date: _____

Ministry Information

Are you a member of an AFLC church? No Yes What is the church name? _____

If no, what church/denomination do you belong to? _____

Please describe other ministry involvement outside of your congregation: _____

Do you have any previous missions trip experience (short or long term): Yes No (If Y, Please describe.)



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Why did you decide to apply for this ministry? _____

What experiences have you had with cultures other than your home culture? _____

What strengths do you have that will contribute to the ministry? _____

Is your family in agreement with your desire to be in foreign missions? _____

What are your expectations for your ministry assignment while you are serving as a Missionary Assistant?

What are your concerns and/or fears about this experience? _____



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What are you praying that God will teach you and/or do in and through you on this trip? _____

Briefly tell your faith story: _____

Are there any medical conditions of which Journey Missions should be aware? _____

Are you healthy enough to travel internationally, performing the tasks given to you (Please list and describe)?

Please list emergency contacts information (Name, Address, Phone)

Emergency Contact #1:

Name: _____

Phone: _____

Address: _____

Emergency Contact #2:

Name: _____

Phone: _____

Address: _____



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Code of Conduct

Missionary Assistants strive to represent Jesus Christ and Journey Missions to people who may not know Jesus. Thus, as a participant of the Journey Missions Missionary Assistant program it is expected that you conduct yourself according to the highest standards of integrity and morality, so as not to compromise the ministry partners or the image of Christ.

In summary, we ask that you refrain from any behavior that may hinder your ministry or the ministry of the mission for the duration of your time; and we ask that you follow these guidelines, recognizing that, should you conduct yourself otherwise, you and the ministry are put at risk. By reading and signing this Code of Conduct you are agreeing to abide by Journey Missions guidelines for the duration of your time cross culturally. Failure to follow these guidelines will result in disciplinary action up to and including dismissal from the mission field, in which case you will travel home at your own expense.

I will:

1. Go as a servant of Jesus Christ and adopt that attitude when dealing with fellow Missionary Assistants, additional team members, missionaries, and other people I meet during the trip.
2. Be flexible in attitude, recognizing that schedules and activities may change.
3. Accept and submit to the leadership and authority of Journey Missions and/or country host(s) and promise to abide by their decisions as they concern this ministry trip.
4. Respect advice given by the country host(s) regarding attire, eating and drinking, personal interactions, and traditions that will help better understand and assimilate into the local culture.
5. Follow the guidelines provided by Journey Missions leadership and country host(s) regarding gift giving.
6. Be aware in regards to what could be perceived as flaunting our wealth. It is not uncommon for the jewelry, cameras, electronics etc. we bring internationally may cost more than those we visit may earn in years.
7. Be respectful in regard to photography. We want to remember our experiences with photos yet we must be aware of respecting the dignity of our hosts. This is especially true of video recording.
8. Ensure that Journey Missions leadership and/or country host(s) know where I am at all times. I will not wander off or follow my own agenda regarding the use of my time during the trip.
9. Refrain from drunkenness or using tobacco/ illegal drugs at any time while traveling internationally.
10. Refrain from inappropriate public displays of affection and one-on-one social activities with members of the opposite sex.

I have read and understand and agree to the above guidelines for conduct while on my short-term ministry opportunity. I recognize and agree that in the event that my conduct is considered so unsatisfactory that it jeopardizes the success of the ministry, and that mediation while serving has failed to correct my behavior, that my services with the ministry shall end, and I shall return home immediately at my own expense.

I agree with the above expectations and certify the information in this application is true to the best of my knowledge.

Print name: _____ Date: _____

Signature: _____



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Applicant Release for Background Check

In connection with my application with the Journey Missions/World Missions departments of the Association of Free Lutheran Congregations, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. Further, I understand that the Association of Free Lutheran Congregations will be requesting information from various Federal, State and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, any party or agency contacted to furnish the above-mentioned information and release all parties involved from liability and responsibility for doing so. This authorization and consent shall be valid in original, fax, or copy form.

Applicant’s Signature

Date

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:

Please Print Clearly:

Print Full Name: _____

Sex: Male _____ Female _____

Print other names you have used: _____

Dates used: _____

Date of Birth (mm/dd/yy): _____

Social Security# _____ - _____ - _____

Address: _____ City : _____

State: _____ Zip: _____

Current Driver’s License #: _____ Issuing State: _____

Other Driver’s License #'s: _____ Issuing State: _____
(List last 7 years only)



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CONDITIONS OF PARTICIPATION AND ASSUMPTION OF RISK AND GENERAL RELEASE AGREEMENT

IN CONSIDERATION for my participation in a short-term mission trip, sponsored, organized, and operated by Journey Missions, a department of the AFLC World Mission Corporation, to _____ on or about _____, 20____ to _____, 20____, to serve with the Journey Missions team and will include without limitation, travel, team training, construction, outreach ministry, sightseeing, sports, recreation, and other similar activities customarily associated with Journey Missions team mission service (hereafter, collectively referred to as "my Mission Service" or "Mission Service"), I agree to all the terms and conditions set forth in this agreement ("Agreement"):

1. General Risks of Missionary Activities

I am aware of the hazards and risks to me and my property that are associated with serving in a missions capacity, such hazards and risks including without limitation, injury; accidents; disease; inadequate medical services and supplies; criminal acts (including terrorism); natural disasters; weather conditions; government action; the risks of traveling to or from my mission destination; and other undefined harm or damage which may not be readily foreseeable, and other present unknown risks and dangers (collectively, "Risks"). I recognize and understand that the Risks have always been associated with Mission Service and cannot be eliminated. I knowingly, voluntarily, and willingly assume the Risks.

2. Payment of Ransom, Yielding to Extortion

This organization recognizes that payment of ransom, acquiescing to other demands in kidnapping and hostage-taking cases, and making concessions in the face of extortion are all actions that contribute to the probability that similar future events will occur. Put another way, we understand that payment of ransom or similar actions that make the underlying event a "success" in the minds of the perpetrators will create incentives to encourage the same perpetrators, or others, to commit similar acts in the future.

This organization also places a high value on the safety of its members, staff and families, and in cases of kidnapping or hostage-taking desires to take all reasonable steps to secure the safe release of the hostage(s).

It is the policy of this organization that in cases of kidnapping, hostage-taking or other extortion, no ransom or concession that is reasonably likely to cause or contribute to the probability that future similar events will occur shall be paid (or made).

In specific cases, it shall be the responsibility of the Crisis Management Team to determine whether or not a proposed payment or concession complies with both the letter and spirit of this policy. If the Crisis Management Team cannot reach a consensus on this policy as it applies to a specific proposed concession, or if a proposed concession would likely be viewed by the broad Christian community as violating the spirit of this policy, the proposed payment or concession shall be reviewed by the authority that convened the Crisis Management Team prior to the proposed payment of concession being agreed to or made.

3. Specific Risks of Missionary Activities in Eastern Europe (high risk areas)

I understand that, at this time, there is an active war between Ukraine and Russia. Due to this war, I understand that travel and living conditions in the geographic region nearby Ukraine, including but not limited to the countries of Russia, Moldova, and Belarus, as well as the general geographic area of Eastern Europe, is particularly dangerous. I understand that Ukraine is currently classified as "a high-risk area" by the U.S. Department of State. I also understand that there are severe risks and hazards associated with war, both known and unknown, including, without limitation, severe physical injury, kidnapping, and/or death (collectively, "War Risks.") I knowingly and voluntarily agree to assume the War Risks related to or arising from my Mission Service.

I understand that Journey Missions and the AFLC World Mission Corporation are not responsible for matters beyond their control and that they cannot warrant the safety or suitability of the circumstances under which I will be living or working. I acknowledge that it is my responsibility to take every precaution to safeguard my health and protect my personal belongings from damage or theft.



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4. Standards of Conduct

I agree to conduct myself in a manner compatible with local laws and regulations; with all of Journey Missions' and the AFLC World Mission Corporation's policies and guidance; and the orders and directives of my Mission Service team leaders. I will refrain from conduct that is improper, offensive, disruptive, or otherwise inappropriate for the Mission Service, or that is potentially detrimental to my own or others' health or safety, or potentially detrimental to Journey Missions or the AFLC World Mission Corporation. I understand and affirm that Journey Missions and the AFLC World Mission Corporation have sole right and discretion to terminate my participation in the Mission Service, including violations of this paragraph. I further understand that if my participation is terminated, I will not receive any refunds and I will be responsible for arraigning and paying all costs associated with my termination, including without limitation, travel costs.

5. Health Status; Medical Care; Other Emergencies

I certify that I am physically fit and adequately prepared to participate in Mission Service. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Mission Service and notify Journey Missions of any health issues or diagnoses that restrict my Mission Service participation. I hereby release Journey Missions and the AFLC World Mission Corporation from any and all claims, damages, injuries, or loss arising out of my failure to disclose such health issues or diagnoses.

I understand that I am solely responsible for obtaining any required vaccinations and immunizations prior to my Mission Service.

I understand that I am required to maintain medical insurance throughout my Mission Service and that I am solely responsible for paying for any and all medical care related to my Mission Service.

I authorize Journey Missions and the AFLC World Mission Corporation to obtain and render appropriate emergency medical care or treatment for me as may be necessary should any injury, harm, or accident occur during my Mission Service.

6. Photograph & Video Release

I hereby grant Journey Missions and the AFLC World Mission Corporation permission to use my image, likeness, and sound of my voice as recorded on audio or videotape without payment or any other consideration for any lawful purpose. I understand that my image may be edited, copied, exhibited, published, or distributed, and I expressly waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to using my image or recording. There is no time limit on this photographic and video release's validity or any geographic limitations.

7. General Release

Knowing the risks described above, I voluntarily agree, on behalf of my family, heirs, and personal representative(s), to assume all the risks and responsibilities surrounding my participation in the Mission Service.

A. To the maximum extent permitted by law, I release and forever discharge, hold harmless and agree to indemnify Journey Missions; and the AFLC World Mission Corporation; and all of their respective officers, employees, volunteers, and agents (collectively, "Releasees") from any and all present or future claims, demands, actions, or causes of action, losses, liabilities, costs and expenses for injury to person or property, or for any other damage, which I may suffer, or for which I may be liable to any other person, related to my participation in the Mission Service (including periods in transit to or from my Mission Service destination), resulting from any cause, including but not limited to negligence on my part or on the part of any of Releasees. I do hereby expressly covenant and agree to refrain from bringing suit or proceedings at law or in equity or otherwise as provided by law, against any of the Releasees on account of any and all such claims, demands, actions, or causes of action.

B. I agree that should any provision or aspect of this Agreement be found to be unenforceable; all remaining provisions hereof shall remain in full force and effect.

C. I certify that I am age 18 or older. I have carefully read and freely signed this Agreement. I understand and agree that no oral or written representations can or will alter the contents of this document. I agree that this Agreement shall be



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governed by the laws of the State of Minnesota (excluding its conflict of laws principles), which shall be the forum for any lawsuits filed under or incident to this Agreement.

I expressly agree that this Assumption of Risk and General Release Agreement is intended to be as broad and inclusive as permitted by law. I further state that I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS, AND THAT I AM VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS.

I attest to the truthfulness, accuracy, and validity of the foregoing statements under penalty of perjury under the laws of the State of _____.

Signed: _____ Date: _____

Printed Name: _____

Witness Signature: _____ Date: _____

Witness Name: _____



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Missionary Assistant Recommendation Form

Dear Pastor:

We are excited to see the increasing nationwide interest for missions. The person that handed you this form is prayerfully pursuing being a Missionary Assistant with Journey Missions.

While this need not take more than five minutes of your time, please give your frank, thoughtful, and prayerful recommendation about this person’s involvement as an international volunteer. This contact is a primary means for our committee to evaluate the spiritual condition of the applicant. We are eager to see people who are trusting in Jesus and stretching to serve Him involved in this opportunity.

Please fill out this form and have it mailed within 10 days to Journey Missions at the above address.

Thank you for your time!

In Christ,
Jon Nelson
Department Head of AFLC Journey Missions

Name of Missionary Assistant Applicant: _____

Pastor’s Name: _____

Please indicate how you know and how long you’ve known the applicant: _____

How has the applicant indicated an interest or aptitude for missions? _____

Please evaluate the applicant’s attitude and ability to receive instruction from authority: _____

Please indicate if there is any reason to question the integrity or moral character of this applicant:

Finally, do you recommend this applicant to serve with AFLC Journey Missions? Why or why not?:

Sign: _____

Date: _____



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Please fill out this form and have it mailed within 10 days to Journey Missions at the above address.

Thank you for your time!

In Christ,
Jon Nelson
Department Head of AFLC Journey Missions

Name of Missionary Assistant Applicant: _____

Reference Name: _____

Please indicate how you know and how long you’ve known the applicant: _____

How has the applicant indicated an interest or aptitude for missions? _____

Please evaluate the applicant’s attitude and ability to receive instruction from authority: _____

Please indicate if there is any reason to question the integrity or moral character of this applicant:

Finally, do you recommend this applicant to serve with Journey Missions? Why or why not?:

Sign: _____

Date: _____