



FIRSTBAPTIST C A N Y O N

FBC Canyon Mission Trip Request Form (to be completed by the Mission Trip Leader)

Please complete and return to:
FBC Canyon Missions Committee
1717 4th Avenue
Canyon TX 79015
806.655.2501
www.fbc-canyon.org

**This form must be completed for each trip in
which FBC Canyon is involved.**
****International: 6 months prior to trip date.**
****Domestic: 3 months prior to trip date.**

Mission Trip Information

Date submitted: _____

Mission trip name/location: _____

Departure date: _____ Return date: _____

Team Leader information:

Team Leader name: _____

Home address: _____ Home phone: _____

City/State: _____ E-mail: _____

Zip Code: _____ Cell phone: _____

On Field Contact Information

Name: _____ Position/Title _____

Agency affiliation: (circle one **OR** write-in other)

IMB NAMB SBC CBF SBTC BGCT NLAI Other: _____

Phone number: _____ E-mail: _____

Why do they need the mission team's help in their work? _____

What is the nature of the ministry for whom you will be working?
(church plant, youth ministry, orphanage, care ministry, etc)

Team Member Information

What is the anticipated size of your group? _____

Will the team include FBC church members, non-members, or a combination?

How do you plan to publicize the mission trip and enlist team members? _____

How many days will the team members be involved in ministry during the trip?

General Information

LODGING:

Where do you plan for the team to lodge while on this mission trip?
(hotels, homes, camps, etc.)

TRANSPORTATION:

How do you plan to travel to this mission project? _____

Are you planning on reserving any of the church vehicles? If yes, how many? ____

Projected Expenses

What do you project the total cost of the trip to be per team member? _____

**Please fill out the Mission Trip Projected Expenses Form on the chart below:

ITEM	TOTAL COST	COST PER PERSON
Visa fees (if applicable)		
Travel (to & from)		
On site transportation		
Housing		
Meals in route		
Meals in the field		
Airport (fees & tips)		
Insurance (if applicable)		
Supplies		
Other:		
Other:		
Other:		

Total cost per person \$ _____

on team _____ x cost per person \$ _____ = \$ _____ Total

How will you raise funds for this trip? _____

Training

Briefly describe what training you will provide to team members to prepare them for this mission trip?

Once the mission trip is approved by the Missions Committee, the team leader will be notified. At that point, we will discuss with you ways in which FBC Canyon will help with promoting the trip to the church, logistics, and potential funding.