



AMT APPLICATION FORM

This form requires a non-refundable \$50.00 application fee (paid by check or online donation)

1. E-mail submissions should print, complete & scan this form and send to amt@overlandmissions.com

2. Submissions by postal mail should return completed form to:

Overland Missions AMT - P O Box 566 - Cape Canaveral, FL 32920-0566 USA

www.overlandmissions.com - amt@overlandmissions.com

FULL NAME : _____ (AS IT APPEARS ON YOUR PASSPORT)		OCCUPATION: _____	
PERMANENT ADDRESS		DATE OF BIRTH:(MMDDYY) _____	MARITAL STATUS: _____
STREET: _____		GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female	
CITY,STATE, ZIP: _____		PHONE (Work): _____	
PHONE (Mobile): _____	PHONE (Home): _____	PHONE (Work): _____	
NATIONALITY: Which country issued your passport? (i.e United States) _____	E-MAIL: _____		
Are you on Facebook? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes; user e-mail: _____	
No passport yet or applied for renewal? Please submit the application without the passport info and update us later.	PASSPORT NUMBER: _____	DATE OF ISSUE: _____	DATE OF EXPIRATION: _____

EMERGENCY CONTACT INFORMATION	Full Name: _____	Specify Relationship: _____
	Full Street Address: _____	
	Phone Number (w/AC): _____	
	e-mail address: _____	

WHICH COURSE DATE ARE YOU APPLYING FOR?

MAY 2010 SEPT 2010 MAY 2011 SEPT 2011 OTHER

Medical History: (Please attach additional information if more space is needed)

Please state any medications you are currently taking or have taken in the last year, known allergies, physical disabilities or any other pertinent medical information.

I, THE UNDERSIGNED, HEREBY ACKNOWLEDGE THAT THE INFORMATION PROVIDED ON THIS APPLICATION FORM IS TRUE. I HAVE READ, FULLY UNDERSTAND AND ACCEPT THE GENERAL CONDITIONS SET OUT BY OVERLAND MISSIONS IN THE TERMS AND CONDITIONS AND ASSUMPTION OF RISK FORMS.

Signature: _____ Date: _____

Parent's Signature (if under 18): _____ Date: _____

Please specify a t-shirt size next to your desired style

Mens style

Womens style

PLEASE NOTE A COMPLETE APPLICATION INCLUDES THREE PARTS:

1. THIS 10 PAGE APPLICATION FORM WITH FEE
2. PASTORAL REFERENCE (SENT DIRECTLY FROM PASTOR)
3. PHOTO & COLOR COPY OF YOUR PASSPORT

YOUR TELEPHONE INTERVIEW WILL NOT BE SCHEDULED UNTIL ALL THREE PARTS HAVE BEEN SUBMITTED

When completing this form by hand, please affix a passport sized photo here.

When submitting this form by e-mail, please attach a JPG image with a good head and shoulders view of yourself.

How did you hear of Overland Missions?

What do you hope to gain from the Advanced Mission Training?

Describe your calling to the mission field

Please share with us your personal testimony (200 words): when and how did you make Jesus Christ the Lord of your life and how has it shaped your life up to this point?

Briefly describe your current relationship with Jesus Christ:

Briefly describe your relationship with your family:

List all past missionary experience (organizations, job descriptions, locations, dates):

List other ministry or volunteer positions/service (organizations, job description, locations, and dates):

1.	
2.	
3.	

List the name of the current church you attend:

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Pastor's Name

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Work Phone:

--

Church mailing address:

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City:

--

State:

--

Zip:

--

How long have you attended this church?

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Describe your relationship with your church. If you have left a church recently, briefly explain why.

List any previous churches you have attended and the length of time in each church:

1.	
2.	
3.	

List your current employer:

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City:		Phone:		Length of Employment:	
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Job Description:	
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List your last three employers and the length of employment as a reference

Employer 1.	
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Job Description:	
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Phone:		Length of Employment:	
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Employer 2.	
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Job Description:	
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Phone:		Length of Employment:	
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Employer 3.	
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Job Description:	
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Phone:		Length of Employment:	
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List 3 other references that can vouch for your personal character, conduct, gifts and calling. Do not list family members here, but do list significant others, if applicable. If your pastor is your parent, spouse or doesn't know you well, list another member of the church staff who can complete a recommendation form.

Reference name 1 Phone:

E-mail address:

Relationship to you Years known

Reference name 2 Phone:

E-mail address:

Relationship to you Years known

Reference name 3 Phone:

E-mail address:

Relationship to you Years known

List all of the schools you have attended:

School name 1:

Address (city, state & zip)

Degree completed: Years attended

School name 2:

Address (city, state & zip)

Degree completed: Years attended

School name 3:

Address (city, state & zip)

Degree completed: Years attended

School name 4:

Address (city, state & zip)

Degree completed: Years attended

Please comment about yourself in each of the following areas:

Leadership ability:

Physical health and condition:

Ability to work in a team and submit to authority:

Adaptability to different socio-cultural environments:

What unique qualifications, skills or strengths will you contribute to this organization?

If married, is your spouse a Christian? Yes No

Do you have any children? Yes No If yes, how many?

Do you live with your parents? Yes No

Are your parents in agreement with what you are doing? Yes No

If no, please explain

Have you ever been addicted to alcohol, drugs, cigarettes, prescription medication or any other harmful substance in the past?

Yes No If yes, how long have you been free from the addiction(s)

If yes, explain here

Do you have any history of homosexual or lesbian practices? Yes No

If so, when and for how long?

Do you have a criminal record ? Yes No If yes, please explain

Do you have any health or psychological problems we should be aware of ? Yes No
If yes, please explain

Are you currently living a life that is commendable according to the Bible? Yes No
If no, explain

Are you in a romantic relationship ? Yes No If yes, how long?

Are you fluent in a foreign language ? Yes No If yes, which one(s) ?

Have you ever served in the military ? Yes No If yes, which branch ?

Enter your first choice city and state for flight departure (3 letter airport code if known)

Enter a second choice city and state for flight departure, if applicable

Please enter your drivers license number: State issued:

STATEMENT OF FAITH ACKNOWLEDGEMENT

The programs and activities governing the form of worship of OVERLAND MISSIONS INC. shall be based upon and at all times be consistent with the following creed of beliefs.

Overland Missions understands that true Christians can come from many different denominational backgrounds. We attempt to create teams that are well rounded with members that have various gifts and backgrounds in order to create a fully functional 'body' of believers (*as outlined in 1 Corinthians 12*) to accomplish each mission. Though this is our inclination we value unity and sound doctrine above it. Therefore, we ask you to read through our statement of faith, check each statement and sign the bottom in acknowledgement of your agreement with these foundational truths of the Christian faith:

- 1. We believe in the Scriptures of the Old and New Testaments in their original writing as fully inspired of God and accept them as the supreme and final authority for faith and life.
- 2. We believe in one God, externally existing in three Persons – Father, Son and Holy Spirit.
- 3. We believe Jesus Christ was begotten of the Father, conceived by the Holy Spirit, born of the virgin Mary and is true God and true man.
- 4. We believe God created man in His own image; that man sinned and thereby incurred the penalty of sin which is death, physical and spiritual; that all human beings inherit a sinful nature which issues (in the case of those who reach moral responsibility) in actual transgressions involving personal guilt.
- 5. We believe the Lord Jesus Christ died for our sins, a substitutionary sacrifice according to the Scriptures and that all who believe in Him are justified on the grounds of His shed blood.
- 6. We believe in the bodily resurrection of the Lord Jesus, His ascension into Heaven, and His present life as our High Priest and Advocate.
- 7. We believe in the personal return of the Lord Jesus Christ.
- 8. We believe all who repent of their sin and receive the Lord Jesus Christ by faith are born again of the Holy Spirit and thereby become children of God.
- 9. We believe in the baptism of the Holy Spirit, empowering and equipping believers for service, with the accompanying supernatural gifts of the Holy Spirit and in fellowship with the Holy Spirit. We believe in the divinely ordained ministries of apostle, prophet, evangelist, pastor and teacher.
- 10. We believe in the resurrection of both the just and the unjust, the eternal blessedness of the redeemed, and the eternal banishment of those who have rejected the offer of salvation.
- 11. We believe the one true church is the whole company of those who have been redeemed by Jesus Christ and regenerated by the Holy Spirit; that the local church on earth should receive it's character from this revelation of redemption and regeneration and therefore, that the new birth and personal confession of Christ are essentials of church membership.
- 12. We believe the Lord Jesus Christ appointed two ordinances – baptism in water and the Lord's supper – to be observed as acts of obedience and as perpetual witnesses to the cardinal facts of the Christian faith; that baptism is the immersion of the believer as a confession of identification with Christ in burial and resurrection and the Lord's supper is the partaking of the emblems symbolic of the Savior's broken body and shed blood, in remembrance of His sacrificial death, until He comes.
- 13. We believe Christ paid for healing in His death, burial and resurrection in accordance with Isaiah 53:4, Matthew 8:17 and 1 Peter 2:24.
- 14. We believe the Bible teaches that without holiness no man can see the Lord. We believe in the doctrine of sanctification as a definite, yet progressive work of grace, commencing at the time of the new birth and continuing until the consummation of salvation.

If you do not agree with any of the statements above, please explain:

I, the undersigned, agree with the previous statements of faith of which I have already checked each item above individually. I understand that speaking against or demonstrating behavior contrary to these statements either before or during the expedition will be grounds for expulsion.

I understand that the primary purpose of Overland Missions is to share the gospel and empower the local, indigenous church in the third world.

Overland Missions is a non-political organization. When operating with Overland Missions I am required to avoid politically sensitive subjects (i.e. international controversies, US military involvement in other nations, governmental systems), regardless of personal convictions. This is necessary to preserve the goals and vision of Overland Missions.

I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge.

Date: _____ Signature: _____

Please print or type name: _____

TERMS AND CONDITIONS

OVERLAND MISSIONS, your outfitters, operators of the mission, tours and/or suppliers of services and other cooperating agencies act only in the capacity of agent for all matters relating to transportation and/or all other related travel services and assume no responsibility howsoever caused for injury, loss or damage to person or property in connection with any service, including, but not limited to that resulting directly or indirectly from: acts of God, detention, annoyance, delays and expenses arising from quarantine, strikes, thefts, pilferage, force majeure, act of war, insurrection, revolt or other civil uprising, other military action, failure of any means of conveyance to arrive or depart as scheduled, civil disturbance, government restrictions or regulation, discrepancies or change in transit over which it has no control. Reasonable changes in itinerary may be made at the discretion of the trip operator. Upon donation of deposit the depositor agrees to be bound by the above recited terms and conditions. Prices are subject to change without notice due to currency fluctuations and/or other causes.

PAYMENT POLICY

As a non-profit 501(c)3 mission organization all donations made to Overland Missions towards an individual's participation in mission work with us will be considered tax-deductible donations. These donations will be used for the missions work that Overland Missions is engaging in and will be non-refundable. A non-refundable deposit of published fee is required to confirm a booking by the published date. Your final donation is due 30 days before your departure date and is payable by money order, check, credit card or paypal transfer. If full payment is not made prior to departure OVERLAND MISSIONS reserves the right to cancel all arrangements.

TRIP CANCELLATION

OVERLAND MISSIONS reserves the right to cancel any AMT course, expedition or volunteer opportunity due to insufficient sign-ups. In the event of cancellation by Overland Missions, all donations will be deferred towards the participation of alternate course, expedition or opportunity within one year of the cancellation. If an individual chooses not to participate within that time frame all donated monies will be used at the discretion of Overland Missions. In the case of a `would be participants' cancellation, Overland Missions reserves the right to extend this courtesy (deferring donated monies toward an alternate course, expedition or opportunity within a year of the original dates) or to deny it on a case-by-case basis. OVERLAND MISSIONS and participating outfitters are not responsible for any expenses incurred by any members such as equipment, medical insurance, air tickets, etc. OVERLAND MISSIONS and its local operators of their missions and/or suppliers of services and other cooperating agencies reserve the right to expel anyone from an expedition trip who act outside of our moral code of discipline which is determined by the discretion of the expedition leader, or in a manner which is unsafe for themselves, inconsiderate or unsafe to fellow travelers, and/or who ignores the requests of their guide(s) to act in a safe and considerate manner. All expenses incurred as a result of expulsion will be billed to the expelled party.

INSURANCE

A short-term traveler's medical insurance policy is mandatory. Baggage is carried entirely at the owner's risk; OVERLAND MISSIONS assumes no liability whatsoever for damage, loss or delay of property. Trip cancellation insurance may cover your losses on non-refundable air and land costs for trips cancelled due to serious illness.

Date: _____ Signature: _____

Please print or type name: _____

I, as parent or legal guardian of the above named minor, hereby give my permission for this child or legal ward to participate in the trip and further agree, individually and on behalf of my child or ward, to the terms above.

Date: Signature:

Please print or type name:

Release of Liability and Assumption of Risk

IN CONSIDERATION OF being accepted for the adventure mission that I am participating in under the auspices of OVERLAND MISSIONS, it's agents, associates, assigns, employees, officers, licensees, operators, and successors in interest (hereafter OVERLAND MISSIONS), I hereby agree as follows: I have been informed and am aware that ADVENTURE TRAVEL CAN BE DANGEROUS and includes certain risks and dangers, including, but not limited to, the hazards of traveling in undeveloped areas, hazards of traveling by boat, canoe, raft, train, automobile, safari vehicle, aircraft, on foot or by other unconventional means, accident or illness in remote places without medical facilities, dangers of wild animals, forces of nature, and travel by air or other conveyance, extreme weather conditions, physical exertion for which I may not be prepared, and evacuation difficulties, should I be injured or disabled. I accept the inherent risks of the proposed trip and acknowledge that the enjoyment of adventuring beyond normal safety of home and work is in part the reason for my participation on this trip. I HEREBY RELEASE, WAIVE, INDEMNIFY, and AGREE NOT TO SUE OVERLAND MISSIONS for all or any liability to the undersigned, his/her personal representatives, heirs, assigns and next of kin, for any and all losses, damages or injuries or any claim or demand on account of injury or emotional trauma to the person or damage or loss of property of the undersigned, or on account of death resulting from any cause, including negligence (but not the reckless, willful or fraudulent conduct) of OVERLAND MISSIONS or others while the undersigned is participating in a mission, tour or any travel or other arrangements made by OVERLAND MISSIONS. I further agree that I will assume the risk of and release OVERLAND MISSIONS of all liability for any injury or damage to my body or property or my death due to any negligent failure to obtain or administer appropriate rescue operations in the event of injury or mishaps, including failure to obtain adequate medical services, to evacuate or to supply treatment, medicine, or trained rescue personnel. I AGREE that if I am injured or become ill, OVERLAND MISSIONS it's agents or operators may, at any cost, arrange or supply medical treatment, evacuation or any other emergency services on my behalf as OVERLAND MISSIONS deems essential for my safety and well being. I AGREE that OVERLAND MISSIONS its agents and/or operators are not responsible or liable for any complications arising from the administration of any emergency medical treatment. I have read and agree to the policy on cancellations and refunds. I am aware that should I choose not to purchase additional insurance coverage as advised by OVERLAND MISSIONS, I will be liable for all costs in the case of cancellation, trip delays, damage or loss of baggage and medical emergencies howsoever caused. I accept responsibility to have all my passport, visa, vaccination and other travel documentation in proper order. I realize I may contact the embassies or consulates of the countries I plan to visit for information, and that my passport may have to be valid for at least six months after the trip ends. For information concerning possible safety issues for international travel I acknowledge that I may call the State Department at 202-647-4000, and for information concerning vaccinations and health issues I may call the "Center for Disease Control" at 800-232-4636. I EXPRESSLY ACKNOWLEDGE and AGREE that ADVENTURE TRAVEL CAN BE DANGEROUS and involves serious and unpredictable risks of bodily injury, property damage and death and that the foregoing waiver and release is intended to be as broad and as inclusive as permitted by law; that I am not relying on any oral or written representations of OVERLAND MISSIONS regarding safety, and that I am entering this agreement of my own free will. Any controversy or claim arising out of or relating to this agreement, or the making, performance or interpretation thereof, shall be settled by binding arbitration in Orlando, FL, in accordance with the rules of the American Arbitration Association then existing, and judgment on the arbitration award may be entered in any court having jurisdiction over the subject matter of controversy.

Date: _____ Signature: _____

Please print or type name: _____

I, as parent or legal guardian of the above named minor, hereby give my permission for this child or legal ward to participate in the trip and further agree, individually and on behalf of my child or ward, to the terms above.

Date: _____ Signature of Releaser: _____

Please print or type name of minor: _____