



TRIP PROPOSAL AND PLANNING

Please complete this form and return it to the church office. Final approval will be made by the Missions Ministry Team. Allow a minimum of 30 days for a decision DO NOT make any financial commitment to missionaries or ministries.

Trip Leader _____

(Please list email and phone number you would prefer The Mission Ministry to use for questions and to give to potential trip participants)

Trip Leader Email _____ Trip Leader Phone _____

Trip Location _____ Trip Dates _____

Estimated number of participants _____

Target Group within FBCPS (Who and/or what ministry area is likely to go?) Please mark with an X

Youth _____ Single _____ Married Couples _____ Families _____ (minimum age _____)

Women _____ Men _____ Sr. Adult _____ Any age _____ Other _____

What type of ministry will you be doing? _____

1) Contact Name (contact for in-country logistics) _____

Contact Phone _____ Contact Email _____

2) Summarize purpose for this Trip: _____

3) Provide tentative schedule of time on the field: _____

4) Describe Ministry Activities: _____

5) Estimate Ministry Expenses for activities listed above:

_____	_____
_____	_____
_____	_____

6) Describe any touring plans and associated costs: _____