



LAND TEAM APPLICATION - GROUP

BC Mission Boat Society
795 West Island Highway
Parksville, BC V9P 1B9
(250) 248-5300
www.bcmissionboat.org

Church/Organization: _____

Address: _____ City, Province, Postal Code: _____

Phone: _____ Email: _____

Team Leader: _____

Community You Would Like to Visit: _____

Dates Requested: _____

What kind of activities are you hoping to be involved with as a team? _____

What strengths do you have as a team working together, special interests or areas of ministry? _____

Administrative Donation & Other Costs

Land Teams are asked to make a **suggested donation of \$250.00** to the BCMBS to help cover the administrative and preparation costs associated with your group's trip. We provide office support, advertise your programs in the community, facilitate bookings for local accommodation and assist with arranging special transportation. Additionally, a member of our staff may accompany you on the trip to provide leadership. All further costs for your trip to the community will be the responsibility of your team. These costs are usually estimated to be about \$300.00 / person for a one-week mission. These may include food, crafts, facility fees or donations, accommodation, transportation or gifts.

Travel Arrangements

Teams are responsible for arranging their travel to Parksville on Vancouver Island. Please contact our office with your travel details (flight information, ferry times, and accommodation) so that we can schedule our training time and arrange for pick-ups or billeting if necessary. A document with travel and accommodation information can be found on our website in the *Forms & Downloads* entitled *Travel Info*. Summer is a very busy time in Parksville, so reservations for accommodation and ferry travel are strongly recommended.

Please note that your team is not considered to be confirmed until we have received this completed application form.



TEAM MEMBERS

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ALL TEAM MEMBERS MUST COMPLETE OUR *LAND TEAM APPLICATION - INDIVIDUAL* FORM AND ITS ATTACHMENTS.

Team Leader _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____
Name _____	Date of Birth _____

Criminal Record Check: Because we work with children, **all of our mission-field volunteers over the age of 18 are required to provide us with a recent criminal record check.** The check must be no more than twelve months old at the time of your volunteer work.

RECOMMENDATION FROM YOUR PASTOR

I consider this team to be capable of Christian teaching ministry in an isolated community.

Name _____ Phone Number _____

Signature _____ Date _____

Comments _____

Please attach any additional comments or contact us directly with any additional information or concerns. We can be reached at (250) 248-5300 or emailed at office@bcmissionboat.org.