

# HBC Missions Financial Assistance Application for Teams

## Please Remember:

- Funding is limited; there is no guarantee of funding
- Funding is given only for HBC-sponsored trips
- Funding will not be available for individual team members when the team has received funds from the missions committee
- Request should be submitted 60 days prior to mission departure date
- Application must be completed and signed before being considered by Missions Committee
- All request will be considered

**Application Date:** \_\_\_\_\_ **Trip Destination:** \_\_\_\_\_

## Team Leader Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Mission Project Information:

Where are you planning to do your missions project this year? \_\_\_\_\_

\_\_\_\_\_

Who is your contact person there? \_\_\_\_\_

Their Address: \_\_\_\_\_ Phone \_\_\_\_\_

Describe the ministry and evangelistic activities you are planning to do: \_\_\_\_\_

\_\_\_\_\_

How many people are you planning to take: Adults? \_\_\_\_ Youth? \_\_\_\_ Children? \_\_\_\_

How will you be traveling? \_\_\_\_\_

## Financial Information:

What are your estimated total expenses for the Mission Trip? \_\_\_\_\_

Summarize your budget estimates for the mission trip:

Travel \$ \_\_\_\_\_

Food \$ \_\_\_\_\_

Lodging \$ \_\_\_\_\_

Insurance \$ \_\_\_\_\_

Supplies \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

What is the estimated cost per team member? \$\_\_\_\_\_

What funds are already set aside or available for this trip before team member payment?

\$\_\_\_\_\_

What is the amount you are requesting from the missions committee? \_\_\_\_\_

What are your plans for acquiring the rest of the money needed? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*I understand that any financial support we as a team receive for this mission trip must be used solely for this mission trip. Should we not go on the mission trip, we will refund the money to Harrisburg Baptist Church. We commit to conduct ourselves in a manner that will bring honor to Christ and my church family. We understand this money comes from the Lord and is given to me through the financial support of Harrisburg Baptist Church.*

Team request: \$\_\_\_\_\_ Dollar amount.

\_\_\_\_\_  
*Team Leader Signature*

\_\_\_\_\_  
*Date*

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**To be completed by the Missions Committee of Harrisburg Baptist Church**

Date and time application received: \_\_\_\_\_

Application denied. State reason \_\_\_\_\_

Application approved. Amount \$\_\_\_\_\_

Check # \_\_\_\_\_ (Note check will be made out to applicant)

Date Mailed \_\_\_\_\_ (Enclose copy of application)

\_\_\_\_\_  
Missions Committee Chairman

/\_\_\_\_\_  
Financial Secretary