



Heartland Baptist Missions, INC.
www.heartlandbaptistmissions.org

Application for HBM Mission Team

SERVING MISSIONARIES Around the World

Medical Teams Mission Internships Ministry Teams Survey Trips Construction Teams Life Missionaries

Insert/Attach
YOUR

PICTURE HERE

Please indicate **WHERE YOU DESIRE TO SERVE:**

Country

Missionary

Australia France Ghana Honduras Papua New Guinea Philippines Quebec
Roatan Uganda India Ivory Coast Belize Brazil Romania Mexico

TIME YOU DESIRE TO SERVE: ☐ Two weeks ☐ More than two weeks

DATES YOU DESIRE TO SERVE: Start Date (mm/yy) End Date (mm/yy)

PLEASE PRINT LEGIBLY THE FOLLOWING INFORMATION:

First Name	MI	Last Name	Birthday (mm/dd/yy)
College Box #	Class (Fr, Soph, Jr., Sr, GA, Grad)		Major / Occupation
Residence Hall Ext	Cell Phone	Home Phone	
Personal Email Address	College Email		
Place of Employment	Work Phone/ / ext.#	Work Email	
Parents' Names (if unmarried and under 25)			Home Phone
Home Church	City	State	Zip
Pastor's Name		Church Phone	
Married <input type="checkbox"/> Yes <input type="checkbox"/> No	Spouse's Name		Number of Children

MY "Heartland" SHIRT SIZE PREFERENCE: ☐ S ☐ M ☐ L ☐ XL ☐ XXL

NOTE: SUBMIT COMPLETED APPLICATION FORM on line (**both sides**) and YOUR PICTURE TO Heartland Baptist Missions. Your application will be forwarded to your team leader.

PLEASE CHECK ALL THAT APPLY:

Do you know **beyond all shadow of doubt** that **you are saved**? ☐ Yes ☐ No

Do you have a computer? ☐ Yes ☐ No

Do you agree to **attend and be prepared** for mission meeting? ☐ Yes ☐ No

Do you agree to meet **all financial / ministry deadlines**? ☐ Yes ☐ No

Are your **Parents/Guardians in favor** of this mission trip? ☐ Yes ☐ No

Is your **Pastor in favor** of this mission trip? ☐ Yes ☐ No

Do you have **preaching experience** (male only)? ☐ Yes ☐ No

Are you **faithful** in attendance to your home church? ☐ Yes ☐ No

Are you **active in a ministry** in your home church? ☐ Yes ☐ No

Do you have a **servant's heart**? ☐ Yes ☐ No

Do you have a **teachable spirit**? ☐ Yes ☐ No

Do you have **conservative music standards**? ☐ Yes ☐ No

Do you have **conservative dress standards**? ☐ Yes ☐ No

Have you ever **led a soul to Christ**? ☐ Yes ☐ No

Has **God called you** to be a full time missionary? ☐ Yes ☐ No

Are there any foreseeable **conflicts**, if you are approved? ☐ Yes ☐ No

Have you been on a Mission Trip **previously**? ☐ Yes ☐ No

Specify the year & country _____ Traveled with: _____

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PASSPORT INFORMATION:

United States of America Citizen ☐ Yes ☐ No
I have a valid passport ☐ Yes ☐ No

PRINT your Name **AS IT APPEARS** on your Passport

Passport Number (US has 9 numbers) Exp. Date (dd/mm/yy) Birth Date (dd/mm/yyyy)

PLEASE CHECK MINISTRY AREAS IN WHICH YOU DESIRE TO PARTICIPATE:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Preach | <input type="checkbox"/> Direct games | <input type="checkbox"/> Puppetry |
| <input type="checkbox"/> Teach School | <input type="checkbox"/> Lead singing | <input type="checkbox"/> Sing |
| <input type="checkbox"/> Play piano | <input type="checkbox"/> Teach Crafts | <input type="checkbox"/> Balloon art |
| <input type="checkbox"/> Teach Bible story | <input type="checkbox"/> Teach Missionary story | |
| <input type="checkbox"/> Teach Bible verse | <input type="checkbox"/> Play instrument: _____ | |
| <input type="checkbox"/> Give object lessons | <input type="checkbox"/> Other: _____ | |
| <input type="checkbox"/> Teach a Bible Module Class in the Bible Institute (Men only) | | |
| <input type="checkbox"/> Teach in an Education, Pastor's, Medical Seminar | | |

GIVE A BRIEF OVERVIEW OF YOUR HEALTH HISTORY:

(Immunization shots you have had.....Allergies.....surgeries..... general health)

WHY DO YOU DESIRE TO GO ON THIS TRIP?

PLEASE DESCRIBE YOUR PARTICIPATION IN CHRISTIAN SERVICE/ MINISTRIES BOTH AT HOME AND AT COLLEGE (IF APPLICABLE):

PLEASE GIVE A BRIEF TESTIMONY OF YOUR SALVATION:

IF YOU HAVE BEEN CALLED TO SERVE AS A FULL TIME MISSIONARY, PLEASE WRITE WHERE GOD MAY BE CALLING YOU AND WHAT HE IS LEADING YOU TO DO:

I agree to pay my **non refundable deposit** of \$100 per person

In signing this form, I agree to pay the **complete balance of all support due** for this trip .

NOTE: Cost includes airfare, insurance, govt. travel tax, accommodations, meals, in-country transportation, Bibles, tracts. and ministry supplies. Extra support raised goes to the missionary.

Signature

Date

Heartland Baptist Missions

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Pensacola, FL 32505
(850) 380-2631
(850) 324-7359

director@heartlandbaptistmissions.org

Office use only

- ☐ Interviewed __/__/__
- ☐ Accepted
- ☐ Alternate