

Mail check and completed registration form to:

(participant name)

**MOSES INC**

1380 SPAULDING AVE SE GRAND RAPIDS MI 49546

E-Mail: mosesjudy@gmail.com

mosesweb.org Ph: (616) 949-0344 Fax: (616) 949-1920

**Spring Break Trip Registration 2010**

THIS REGISTRATION CANNOT BE PROCESSED UNLESS ALL APPLICABLE AREAS OF THIS FORM HAVE BEEN COMPLETED AND RETURNED WITH FULL PAYMENT TO THE MOSES OFFICE.

RETURN THIS COMPLETED REGISTRATION ALONG WITH YOUR CHECK OR MONEY ORDER (NO CASH PLEASE) IN AN ENVELOPE WITH FIRST CLASS POSTAGE.

Today's Date: \_\_\_\_\_ Previous MOSES Experience: **Y N**

Do you see yourself as a Teen Leader? **Y N** Do you see yourself as an Adult Leader? **Y N**

\*\*All persons 21 years and older must complete an Adult Leader Application and be approved in order to participate on a MOSES trip.\*\*

What, if any, previous short-term mission experience have you had? \_\_\_\_\_

What are your expectations of this trip? \_\_\_\_\_

How do you plan to contribute (other than financially) to this trip? (please list any musical, foreign language , and construction gifts) \_\_\_\_\_

**Permanent Address**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Is this a new or change of address? Yes No (Circle One) Tee-Shirt Size: S M L XL XXL

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Sex: M F Age as of Trip Departure Date: \_\_\_

High School: \_\_\_\_\_ Class of: \_\_\_\_\_

Parents' Names: \_\_\_\_\_

Church: \_\_\_\_\_

**High School Trips:    DATES                      COST\*\*                      Deadline                      After Deadline**

**\*Two sites (tbd)    April 1-10, 2010                      P \$325/ L \$225                      **03/10/2010**                      \$350/\$250**

\*\*There is also a one-time fee of \$12.00 to purchase a MOSES Travel Bag. All items you wish to bring into the van must fit into that bag (pillow is an exception). If you already have a MOSES Travel Bag, you do **not** need to purchase another\*\*

Do you need to purchase a MOSES Travel Bag?    **Y    N**

**NOTE:** High School destinations are assigned following prayer and drawing. High school participants (1 friend, same sex) are allowed to sign up for the same destination (to be drawn). Friends will be assigned to different travel team vans. Both names must be on the registration and the registrations must be sent in together.

**For office use only**

Date Registration Received: \_\_\_\_\_ Fees Received: \_\_\_\_\_    \_\_\_ Cash    \_\_\_ Check    \_\_\_ Voucher

Balance Due: \_\_\_\_\_ Date Paid In Full: \_\_\_\_\_

**Registrations will be accepted if:**

1. all sections of the registration are completed and signed.
2. your **non-refundable** complete trip fee (or \$100 deposit) is enclosed with the registration.
3. your registration arrives before the trip is full.

Note: If we cannot accommodate you on the trip, a refund will be given.

As a part of the team, I will enter into covenant with the rest of the team and leaders with regard to the following:

1. Prayer for and with the rest of the team.
2. Attendance and participation at all planning sessions and commissioning service.
3. Commitment to a growing relationship with Jesus Christ through Bible study and small group times with others.

**MEDICAL INFORMATION**

Do you have medical insurance?    Y    N                      Date of last tetanus shot: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Policy Holder: \_\_\_\_\_ Date of Birth of Policy Holder: \_\_\_\_\_

Physician: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Parent's work phone: father (\_\_\_\_\_) \_\_\_\_\_ mother (\_\_\_\_\_) \_\_\_\_\_

List ALL prescription medications: \_\_\_\_\_

***NOTE: all prescription and over-the-counter medications are to be turned over to the Trip Coordinator at departure.***

List any illnesses or allergies: \_\_\_\_\_

List any disabilities or special needs: \_\_\_\_\_

***Please attach a letter of explanation along with any special care needs. Include a photocopy of the front and back of participant's health insurance card and bring the actual card on the trip.***

I, \_\_\_\_\_ the Parent/Guardian/Participant (circle one), authorize MOSES and its adult leadership to dispense Ibuprofen, Acetaminophen, or Aspirin in the event of an illness while participating on a MOSES service project.

**Parent/Guardian/Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**CONSENT TO TREAT**

I, \_\_\_\_\_ the Parent / the Guardian / the Participant (circle one), authorize MOSES and its adult leadership to consent to an x-ray, examination, anesthetic, medical or surgical diagnosis, treatment and hospital care as deemed advisable under the supervision of any licensed physician, or the medical staff of a licensed hospital or med center in the event of accident or illness while participating on a MOSES service project. I will reimburse MOSES at the end of the trip for any treatment received.

Authorization is given in advance of any treatment or care being rendered and provides authority on the part of MOSES to give specific consent to any treatment or care.

I hereby authorize the hospital or physician which has provided treatment to surrender physical custody of the participant to the MOSES adult leader upon completion of treatment.

**RELEASE OF LIABILITY**

I, (participant) \_\_\_\_\_, plan to participate in the service project indicated and any related MOSES sponsored activities and recognize that participation in these activities may be hazardous.

In consideration of the privilege to participate extended to me by MOSES through its board of directors, I hereby, for myself, my heirs, executor, and/or administrator, forever release and discharge MOSES and its board of directors and service project leaders from any liability while participating individually or with others in said events.

**I have read, understand, agree with, and will comply with the MOSES rules, Consent to Treat, and Release of Liability.**

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Parent (Guardian) Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Please Keep This Page for Future Reference

**MOSES Rules**

The following rules are designed to enhance group unity. By signing this registration, I agree to abide by these rules.

1. Respect and obedience toward all teen team and adult leaders is mandatory.
2. No cell phones or personal electronic equipment.
3. No dating relationships or public display of affection (PDA) such as hand-holding, arm over shoulder or around waist.
4. No entering sleeping quarters of the opposite gender.
5. No tobacco, alcohol, or illegal substances. **(MOSES trips and activities are tobacco- and alcohol-free).**
6. No leaving the premises alone or without the permission of a Leader.
7. Apparel should be modest and appropriate at all times. Our appearance should reflect our mission of reaching others for Christ, not draw attention to ourselves. Student and adult leaders have the right to ask a participant to change or cover up inappropriate attire.
8. Profanity and offensive language are not acceptable and will not be tolerated.
9. The acquisition of tattoos or body piercings is not permitted on our trips.
10. Obey all Local and Federal Laws

**NOTE: Breaking of any of the above rules may result in the participant being sent home at his / her family's expense.**

**MOSES Provides**

- Ground transportation from your church or other predetermined location
- Experienced Christ-centered staff
- Lodging
- Meals while at the site
- Devotions led by MOSES teen team leaders.
- Travel bag for van ride

**You Provide**

- Your Bible, paper, and pen / pencil
- A servant's spirit
- Personal items / work clothes
- Sleeping bag and pillow
- Snacks to share
- Hand tools such as a hammer, paint brush, and tape measure
- Birth certificate and photo I.D. (non-US trips only)

**Key: P = Participant; L = Leader**

<b><u>Toronto Trip:</u></b>	<b><u>Trip Dates</u></b>	<b><u>COST</u></b>	<b><u>Registration Deadline</u></b>	<b><u>After Deadline</u></b>
	November 26-30/2008	P \$100/L \$65	10/26/09	P \$115/L \$85

**Weekend Trips:** MOSES is willing to accommodate your group on a weekend trip. All bookings are based on availability of leadership and work sites. **Early contact is essential to book your preferred trip.** Call the MOSES office: 616-949-0344.

**Chicago Trips** (11 minimum or \$550 per van, call for schedule)      COST: \$50 Per Person

**Detroit Trips** (11 minimum or \$550 per van, call for schedule)      COST: \$50 Per Person

**Spring Break Trips: (P = Participant/L= Leader)**

<b><u>High School Trips:</u></b>	<b><u>Trip Dates</u></b>	<b><u>COST</u></b>	<b><u>Registration Deadline</u></b>	<b><u>After Deadline</u></b>
	April 1-10, 2010	P \$325/ L \$225	03/10/2010	\$325/\$235

- **NOTE:** High School destinations are assigned following prayer and drawing. High school participants (1 friend, same sex) are allowed to sign up for the same destination (to be drawn). Friends will be assigned to different travel team vans. Both names must be on the registration and the registrations must be sent in together.

**Mexico Trips:**

Ensenada, VBS / Construction/ Sports Camp

	<b><u>Trip Dates</u></b>	<b><u>COST**</u></b>	<b><u>Deadline</u></b>	<b><u>After Deadline</u></b>
<input type="checkbox"/> Summer Trip I	July 13 to July 25, 2010	P \$650/L \$450	06/13/2010	\$675/\$475
<input type="checkbox"/> Summer Trip II	July 20 to Aug. 1, 2010	P \$650/L \$450	06/20/2010	\$675/\$475
<input type="checkbox"/> Combined Trips	July 13 to Aug. 1, 2010	P \$850/L \$600	06/13/2010	\$900/\$625

**\*\*There is also a one-time fee of \$12.00 to purchase a MOSES Travel Bag. All items you wish to bring into the van must fit into that bag (pillow is an exception). These bags may be reused on other MOSES trips.\*\***