



one vision

INTERNATIONAL

Traveler and Medical Information

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trip participation

Traveler Profile

Trip details

TRIP LOCATION + DATES _____

Personal Information

NAME (full legal name as it appears on your passport)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

(home) _____ (cell) _____

E-MAIL ADDRESS _____

DATE OF BIRTH (month/day/year) _____

Passport Information

COUNTRY OF BIRTH _____

COUNTRY OF CITIZENSHIP _____

PLACE OF ISSUE _____

PASSPORT NUMBER _____

EXPIRATION DATE _____

Frequent Flyer Program

AIRLINE _____

PROGRAM NUMBER _____

SPECIAL NEEDS / CONSIDERATIONS _____

trip participation

Traveler Profile

Tell us about yourself*

Please write a short description of your relationship with Christ and how that has led you to be a part of this trip. (Attach additional pages if necessary.)

***Please Attach a Photo** (This can be a copy of your passport photo or another photo of yourself.)

Deposit

Please attach your \$300 non-refundable deposit to this sheet and sign the following statement:

I understand that my deposit is non-refundable and non-transferable. I commit to be a part of this trip and fulfill my financial obligations to One Vision International. I understand that One Vision is a non-profit charitable organization and, in the event that I cannot go on this trip, I must cover the additional expenses that have already been incurred at the time of my cancellation (such as plane tickets, hotel rooms, etc.). In case of emergency, additional charges for care and transportation will be the responsibility of the participant. I commit to meet all deadlines to the best of my ability, attend informational meetings, and follow the instruction of my trip leaders. I understand that details may not always be available ahead of time, that plans may change, and that decisions may need to be made quickly. I promise to be as flexible and understanding as possible, recognizing that my leaders and the other participants promise to do the same. Above all else, I will represent Christ to the best of my ability.

SIGNATURE _____ DATE _____

trip participation

Medical Release and Liability Form

Trip participant information

NAME _____

(List additional contact information on Traveler Profile page)

Emergency Contact

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

RELATIONSHIP _____

PHONE (home) _____ (cell) _____

I, _____, understand that in the event medical treatment is required, I give my permission to the persons on this mission trip to secure the services of available physicians, nurses, or medical personnel to provide necessary care and treatment required for my well-being. I understand that a team member will be required to accompany me for medical treatment and remain with me until I can return to the group or return home to the United States.

I, _____, release any liability of any accident or injury to myself from any part of this ministry, or from any member of the mission team or ministry team. I will not hold One Vision International liable for any instance of injury or accident while I am part of a mission team serving in the United States or in any other country.

SIGNATURE _____ DATE _____

trip participation

Medical Release and Liability Form

Medical Information

Please list any medical allergies, medications being taken, medical problems or other pertinent information:

Employer Information

EMPLOYER NAME _____

EMPLOYER ADDRESS _____

CITY _____ STATE _____

SOCIAL SECURITY NUMBER _____

NAME OF INSURANCE COMPANY _____

INSURANCE POLICY NUMBER _____

trip participation

Checklist of Suggested Items to Pack

Documents

- Passport
- Extra Photocopy of Passport
- Copy of vaccination records (yellow cards from the Health Department)

Luggage

- Carry-on, fanny pack/purse or passport satchel to keep documents on your person at all times
- Checked luggage (wheeled often preferred)
- Backpack or small bag to take during the day to the job site
- Checked One Vision duffel bag (pre-packed)

Clothing

- Long shorts or light-weight pants for each day at the orphanage
- T-shirts or light-weight shirts
- Something comfortable to wear when you return to the hotel for dinner
- Dress, khakis, button-down shirt, etc. for Sunday
- Pajamas
- Socks and underwears (clean set per day)
- Shower sandals
- Light-weight rain jacket
- Walking shoes or sandals
- Something clean to travel home in

Personal items

- Pillow case, inflatable pillow (optional)
- Bath towel(s)
- Washcloth(s)
- Liquid body soap, shampoo and other personal care items
- Hand sanitizer
- Hand wipes
- Hair dryer
- Makeup (optional)
- Bug repellent
- Personal medicine (**be sure to pack prescribed medications in your carry-on luggage in a labeled bottle**), pain relievers, meds for stomach/diarrhea problems
- Malaria prevention (if taking)
- Small First Aid kit

Additional important items to bring

- Spending money for souvenirs and meals in the airport(s); approximately \$100
- Bible
- Story cloth
- Camera, video camera, extra batteries
- Journal
- Flashlight
- iPod
- Clean plastic bag to bring home dirty clothes
- Bandana/cloth for sweat



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Personal Reflection Questions:

Please provide honest answers to the questions below, as they will help your team leader and Missions Team Coordinator in preparing you best for the trip. Any information shared will be held in strict confidence.

1. Please share how and when you became a Christ follower.

2. Why do you want to go on this short-term trip? What do you hope to get out of it?

3. What do you think will be the most challenging part of this trip for you?

4. What other overseas travel experience do you have?

5. What has God been teaching you over the past year? How has your life changed as a result?



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Participation Information for Prayer Partners

Team member's name: _____

Street Address: _____

City, State, Zip code: _____

Email: _____

Names of immediate family:

Country you will be visiting:

Dates of trip (itinerary is attached):

Things you should know:

Why I am going on this trip:

What I hope to accomplish while on this trip:

What I especially would appreciate your prayers for:



Team Covenant:

As a member of this team, I agree to:

1. Remember that I am representing Jesus Christ as well as One Vision International ministries. I will model Jesus in my behavior and attitude.
2. Remember that I am a guest working at the invitation of my hosts.
3. Remember that we have come to learn, as well as to teach. I'll resist the temptation to inform our host about "how we do things". I'll be open to learning about other people's methods and ideas.
4. Respect the host's view of Christianity recognizing that Christianity has many faces throughout the world and that a purpose of this trip is to experience faith lived out in a new setting.
5. Develop and maintain a servant attitude towards all.
6. Respect and follow my team leader(s) and his or her decisions.
7. Respect the people and culture of Haiti in my actions and appearance.
8. Refrain from gossip.
9. Refrain from complaining. Knowing that travel can present numerous unexpected and undesired circumstances; remember the rewards of conquering such circumstances are innumerable. Instead of whining and complaining, be creative and supportive (Phil. 2:14).
10. Attend all team meetings before, during, and after the trip.
11. Remember to not be exclusive in my relationships. If my spouse is on the team, we will make every effort to interact with all the members of the team. If I am attracted to a teammate, or my boyfriend/girlfriend is on the team, I will not attempt to pursue that relationship until after we return home.
12. Refrain from any activity that could be construed as romantic interest in a national or teammate.
13. Refrain from illegal drugs and abstain from consumption of alcoholic beverages or the use of tobacco while on this trip.
14. Refrain from the teaching or practice of any belief that would not be endorsed by One Vision International.
15. Remember that I can be sent home at my own expense if I do not adhere to this covenant or if my Team Leader(s) believes it is in my best interest or that of the team.
16. BE FLEXIBLE 😊

Signature: _____ Date: _____