

APPLICATION

For missionaries of all ages

I,	, agree to participa	te in mission trips and events
sponsored by One International.		
Mr. Ms. Mrs	Middle	Last
Preferred Name:		
First (please print)	Middle	Last
Address:		
City:		
State:		
Zip Code:		
Home Phone:	Cell Phone:	
E-Mail Address:		
Preferred Method of Communication: Ph	one Email Tex	t
Date of Birth:/	Shirt Size:	Weight:
Rooming Designation: STANDARD - \$0.00	0 MAR	RIED - \$225.00
CITIZENSHIP		
Yes, I am an American citizer	n. No, I am not an Ame	rican citizen.
Country of citizenship:	Passport number: _	
Expiration Date:	Attach copy	y of valid passport with this form





EMERGENCY CONTACT INFORMATION

Name:	Relationship to Missi	Relationship to Missionary:			
Address:	City	State:	Zip:		
Home Phone:	Cell Phone:				
E-Mail Address:					



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STATEMENT OF LIABILITY

ONE INTERNATIONAL WAIVER AND RELEASE FROM LIABILITY, AND AUTHORIZATION TO PARTICIPATE IN TRIP, AND STATEMENT OF RESPONSIBILITY ("Agreement").

The agreement must be signed and returned to One International. If the Participant (as shown below) is not 18 years of age or older on the date of execution of this Agreement, this Agreement also must be signed and notarized by the parent or guardian. Failure to accept and/or abide by the terms and conditions of this Agreement as provided may result in the Participants' inability to participate in the trip.

I,	(missionary), have agreed to be a Participant in the mission trip
sponsored in whole or in part by One Inte	ernational. In consideration of being allowed to participate in this trip, I
hereby state and agree as follows:	

1. STANDARDS OF CONDUCT

A. I agree to abide by One International's conduct regulations and the directions of the group sponsor and his or her designees. I understand that the group sponsor has the right to enforce appropriate standards of behavior and that I may be dismissed from the trip at any time for failure to comply with such standards. One International reserves the right to physically remove me from the trip at any time should my actions or general behavior impede the trip, or the rights and welfare of any person, including but not limited to my own welfare. Similarly, if my conduct violates any policy or procedure of One International, I understand that I may be required to leave the trip at the sole discretion of One International's agents and representatives. I understand that if my participation in the trip is terminated by the group sponsor, I will be sent home with no refund of fees. If I am sent home before completion of the trip, I understand that I will be responsible for any and all costs and expenses associated with my return home.

B. I acknowledge and understand that, while I am a participant, I am responsible for my own behavior and any legal or financial consequences just as I would be if I were not a Participant on a One International trip.

2. INSTITUTIONAL ARRANGEMENTS

I understand that One International does not represent or act as an agent for, and cannot control the acts of omissions of, any host institution, host family, transportation carrier, hotel, tour organizer, or other provider of goods or services involved in the trip. I understand that One International is not responsible for matters that are beyond its control. I hereby release One International from any injury, loss, damage, accident, delay, or expense arising out of any such matters.

3. PROGRAM CHANGES

I understand that One International reserves the right to make cancellations, substitutions, or changes to the trip in its sole discretion, with or without notice, and that One International shall not be liable for any loss to the Participants by reason of any such cancellation, change or delay. One International is not responsible for losses or penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the Participant or One International makes a flight arrangement. Any additional expense resulting from



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the above will be paid by the Participant. One International reserves the right to substitute hotels or accommodations or housing or a similar category at any time. If I become detached from the group, fail to meet a departure vehicle, airplane, boat, or train, I will at my own expense seek out, contact, and reach the group at its next available destination.

4. INDEPENDENT ACTIVITY

I understand that, if I choose to travel independently before, after or during my free time in the trip, such travel will be unsupervised by One International's agents or employees. I agree that One International and its agents and employees shall have no responsibility or liability for injury, damage or loss suffered by me during such periods of independent travel.

5. HEALTH AND SAFETY

- A. I release and absolve One International of all responsibility and liability for any injuries, illnesses (including death), claims, damages, charges, bills and/or expenses I may incur while abroad, including all times before, during, and after the duration of the trip. For the avoidance of doubt, I am fully releasing One International of any liability that may result for any aspect relating to a One International trip.
- B. I understand that I am responsible for ensuring that I am adequately covered by health and accident insurance including periods before, during, and after the duration of the trip. I have provided evidence of emergency contact information and any information I want One International to have on me regarding coverage for accident, illness, hospitalization, accidental death and dismemberment, and emergency medical evacuation as an attachment to this agreement.
- C. I agree that One International, through its agent and employees, may take whatever action is deemed necessary in their sole discretion with respect to my health and safety, I authorize One International and its agents and employees to place me, at their discretion and without my further consent, in a hospital or in the care of a local doctor for medical services and treatment. If necessary or desirable, I also authorize them to transport me back to the United States for medical treatment. I agree that I, along with my parents or guardian, will be fully responsible for any and all expenses, including transportation costs, associated with or in any way related to my medical care.
- D. I agree to report to the group sponsor, as soon as I become aware of such, any physical or mental condition I have which may require special medical attention or accommodation while traveling.
- E. I am aware of all applicable personal medical needs. I have arranged, through insurance or otherwise, to meet any and all needs for payment of medical costs while I participate in the trip. I recognize that One International is not obligated to attend to any of my medical or medication needs, and I assume all risk and responsibility therefore. If I require medical treatment or hospital care, before, after, or during the trip, One International is not responsible for the cost or quality of such treatment or care.



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6. ASSUMPTION OF RISK AND RELEASE OF CLAIMS

A. I hereby acknowledge my awareness that my participation in the trip may expose me to risk of property damage and bodily or personal injury, including death. I understand that the risks I may encounter include by way of example: airplane crashes, motor vehicle accidents, terrorist incidents, cuts, bruises, broken bones, political unrest, strikes, acts of God, criminal acts, sickness including but not limited to zika fever and its long-term effects, malaria, yellow fever, dengue fever, dehydration, as well as other risks that may or may not be foreseeable. I HEREBY ASSUME ANY AND ALL SUCH RISKS, AND I ACKNOWLEDGE THAT I AM RESPONSIBLE TO ACT REASONABLY AND PRUDENTLY WITH RESPECT TO MATERS OF PERSONAL HEALTH AND SAFETY.

I understand and acknowledge that One International assumes no responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, war, quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodation, restaurant, transportation, or other services or any substitution of hotels or of common carrier or other circumstances, whether or not beyond One International's control, with or without notice, or for any additional expenses occasioned by any of the foregoing. If I am required to spend additional nights in the trip country, the airport, back in the US, or any reason whatsoever, One International will not be responsible for my hotel transfers, meal costs, or other expenses. My baggage and personal property are at my risk entirely. The right is reserved by One International, in its sole discretion, to cancel the trip or any aspect thereof after departure, requiring that all participants return home, if One International believes that any person(s) will be in danger if the trip or any aspect thereof is continued.

KNOWING THE RISKS DESCRIBED ABOVE, and in consideration of One International allowing my participation in the trip, individually and on behalf of any family, heirs, assigns, and legal and personal representative(s) (and if applicable, on behalf of my minor child/ward), to the maximum extent permitted by law, I HEREBY ASSUME ALL THESE RISKS AND RELEASE, WAIVE, AND FOREVER DISCHARGE ONE INTERNATIONAL, ITS BOARD OF TRUSTEES, ITS OFFICERS, DIRECTORS, AGENTS, EMPLOYEES, VOLUNTEERS (WHETHER OFFICIAL OR UNOFFICIAL), SUBSIDIARIES. AFFILIATES, SUCCESSORS, (THE "RELEASEES") FROM LIABILITY FOR ANY AND ALL HARM, INJURY, CLAIMS, DEMANDS, RIGHTS, CAUSES OF ACTION, COSTS AND EXPENSES OF WHATEVER KIND, ARISING FROM OR BY REASON OF ANY LOSS, DAMAGE, OR INJURY SUSTAINED (WHETHER PHYSICAL OR FINANCIAL) BY ME OR CAUSED TO MY PROPERTY, OR THE CONSEQUENCES, WHETHER KNOWN OR UNKNOWN, BOTH NOW AND FOREVER IN THE FUTURE, RESULTING FROM, OR IN ANY WAY CONNECTED WITH, MY PARTICIPATION IN THE MISSION TRIP OR ANY PRELIMINARY OR FOLLOW UP ACTIVITY RELATED THERETO.

B. The terms of this agreement shall be severable, such that if a court holds any term to be illegal, unenforceable, or in conflict with any law governing this agreement, the validity of the remaining portions shall not be affected thereby.



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7. ACKNOWLEDGMENT

I hereby acknowledge that I have read, understand and will abide by each of the terms and conditions of this agreement.

Signature (if 18 or older):			
Missionary:	Date:		
Signatures (if younger than 18):			
Parent/Guardian Printed Name:			
Parent/Guardian Signature:	Date:		
Notary Signature & Stamp:			

DISCLOSURE For missionaries of all ages



RULES & GUIDELINES

BREAKING ANY OF THE FOLLOWING RULES ARE GROUNDS FOR IMMEDIATE DISMISSAL FROM THIS ONE INTERNATIONAL TRIP:

- 1. Illegal acts of any kind including assault, possession of illegal drugs, or possession of weapons.
- 2. Consumption or possession of alcoholic beverages or tobacco products of any kind.
- 3. Departing the designated team housing area alone or unsupervised without the consent of a Team Leader.
- 4. Departing your team or assigned group at any time without the consent of a Team Leader.

BREAKING ANY OF THE FOLLOWING RULES ARE GROUNDS FOR IMMEDIATE DISCIPLINARY ACTION AND POSSIBLE DISMISSAL FROM THIS ONE INTERNATIONAL'S TRIP:

- 1. Fighting with fellow team members.
- 2. Romantic displays of affection with a member of the opposite sex that is not your spouse.
- 3. Disorderly or deliberately disobedient conduct.
- 4. Profanity or temperamental outbursts.
- 5. Disrespectful attitude towards locals or international team members.
- 6. Disrespectful attitude towards team leadership.

As a participant of a One International's trip, I (missionary), have read and fully understand the rules and regulations above. I also understand that I must comply with all One International rules and regulations in order to make my missions experience the best it can be. If I choose not to comply with these rules, I understand that I am subject to the consequences and even dismissal from the mission field AT MY OWN EXPENSE.

DONATIONS AND TRIP FUNDING

ALL ONE INTERNATIONAL DONATIONS AND SUPPORT FOR PROJECTS AND/OR TRIPS ARE CONSIDERED 501(C)3 TAX-DEDUCTIBLE DONATIONS (NOT PAYMENTS FOR GOODS OR SERVICES) AND ARE 100% NON-REFUNDABLE AND NON-TRANSFERABLE. IF YOU FAIL TO MEET THE REQUIRED FINANCIAL DEADLINES, ALL PROJECT OR TRIP FUNDS WILL BE ALLOCATED TO ONE INTERNATIONAL HUMANITARIAN RELIEF EFFORTS. PLEASE ALLOW 7-15 BUSINESS DAYS FROM MAIL DATE FOR ALL CHECKS TO PROCESS AND POST TO YOUR ACCOUNT.

BY SIGNING BELOW, I (missionary), AGREE TO THE ABOVE WAIVER, RELEASE OF LIABILITY, RULES AND GUIDELINES, AND DONATION REGULATIONS. I UNDERSTAND THAT I AM WAVING AND RELEASING RIGHTS THAT I MAY HAVE UNDER THE LAW.



DISCLOSURE

For missionaries of all ages

Signatures:	
Missionary:	Date:
Parent/Guardian Signature (if a minor):	Date:
Notary Signature & Stamp (if a minor):	





MEDICAL RELEASE

Do you have any med	ical disorders includ	ing mental or emotion	al? (Yes or No)
If yes, please complete	a Medical Condition	Form for each conditio	n and/or prescribed me	edication you take.
Condition #1:				
Condition #3:				
Do you have any serio	ous allergies that req	uire the carry and use	of epinephrine and/o	or other meds?
If yes, please complete take.	a Medical Condition	Form for each allergy a	and/or prescribed medi	ication you have and/or
Allergy #1:				
Allergy #3:				
Do you currently take	e any medications, in	cluding prescribed or	over-the-counter me	ds? (Y/N)
If yes, please complete	a Medical Condition	Form for each conditio	n and/or prescribed me	edication you take.
Medication #1:				
Medication #2:				
Please indicate if you	have had an illness o	or condition in the last	2 years:	
Hepatitis	Heart Attack	Hypertension	Epilepsy	Seizures
Hypoglycemia	Rheumatic Fever	Pneumonia	Tuberculosis	Foot/Leg Difficulties
Kidney trouble	Migraine Headache	Diabetes	Cancer	Infectious



MEDICAL RELEASE

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Asthma	Paralysis	Malaria	Amoebic Dysentery	Ulcers
Pregnant (currently)	HIV/AIDS	Other		
Do you have difficulty w wheelchair, walker, cru	_		(Y	/N)
Do you have difficulty w	valking and carry	ing luggage on your	own?(Y	/N)
Do you struggle in extreme heat and/or humidity?(Y/N)				/N)
If you answered yes to	any of the above	e, please complete a	Medical Condition F	orm for each conditio
INSURANCE INFO	RMATION			
Name of Insurance Comp	oany:		Policy #	
AGREEMENT				
"My signature below stat of any medical informati The failure to submit a crefund. The failure to get agree that this medical authorize One Internation internationally with One	on not listed here completed Medica t a doctor's approvinformation may onal to obtain any	could result in my im l Condition Form ma val for international tr be shared with my to	mediate dismissal from y result in the dismissa avel may result in the di rip Team Leader and P	my trip at my expense. I from my trip without smissal from my trip. I roject Director. I fully
Signatures:				
Missionary:			Date: _	
Parent/Guardian Signature	e (if necessary):		Date:	
Notary Signature & Stam	n (if a minor):			