



## MISSION TRIP APPLICATION: IMPACTING YORK WEEK 2026

### :: APPLICANT'S INFORMATION

Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

### :: PARENT/GUARDIAN'S CONTACT INFORMATION

Parent or Guardian's Name: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Alternate Contact Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

### :: MINISTRY INVOLVEMENT

- I regularly attend Fusion. My small group leader(s): \_\_\_\_\_
- I have never gone on a mission trip before.
- Other mission trips I have participated in: \_\_\_\_\_

### :: PERSONAL QUESTIONS

**Please provide your answers to the following four questions on a separate sheet of paper.**

1. How did you come to know God? Tell us about how you became a Christ-follower.
2. Describe your present relationship with the Lord. What has he been teaching you recently?
3. Why do you want to go on this mission trip?
4. Is there anything else we should know about you that you think would help us decide about your service on this team?

### :: MISSION TEAM MEETING SCHEDULE

Below is the schedule with important meeting dates and times. We will confirm if any changes have been made at the first meeting. Please mark **each meeting** to confirm whether you can attend or indicate if there is a conflict. We will consider a student's availability to fully take part in the training as one aspect of the selection process. We recognize that if someone's schedule does not allow him or her to attend the training sessions that this may not be the year for the student to be on the mission team.

If a student is selected, it is assumed the parents and student have committed to the training dates and will only miss the meetings they have identified below.

Parents, please initial below that you have reviewed and confirmed the dates.

Meeting		Confirm
Info Meeting <sup>1</sup>	Sunday, 1/4, 12:15 PM	Parent Initials
Meet & Greet/Spring Clean Info Meeting <sup>2</sup>	Sunday, 3/8, 5:00-6:00 PM (dinner provided)	<input type="checkbox"/> Yes   <input type="checkbox"/> No
Spring Clean Project <sup>3</sup>	Saturday, 4/11, 8:00 AM-5:00 PM (mission trip fundraiser)	<input type="checkbox"/> Yes   <input type="checkbox"/> No
One-Day Training <sup>4</sup>	Sunday, 6/7, 12:30-5:30 PM (lunch + dinner provided)	<input type="checkbox"/> Yes   <input type="checkbox"/> No
<i>Mission Week</i>	<i>Impacting York Week – Monday, July 6-Friday, July 10</i>	
Post-Trip Review <sup>5</sup>	Sunday, August 9 (during Fusion)	<input type="checkbox"/> Yes   <input type="checkbox"/> No

<sup>1</sup> Optional. For parents, students, and leaders who are considering serving on the mission, and want to know more.

<sup>2</sup> Meet others serving on the mission week and learn about how to get involved in Spring Clean.

<sup>3</sup> This is an all-day service project that involves raking leaves, mulching, etc. Donations given help cover the cost of the trip.

<sup>4</sup> Required training for the mission week. Teens are welcome to stay until Fusion starts at 6:30 PM. If you're unable to attend this training, please talk with Jess to find a solution.

<sup>5</sup> Families and friends are invited. Mission team members will share about their experience during Fusion and show pictures.

**Parental Confirmation:**

I have reviewed the calendar with my teen, confirmed the meetings they will be able to attend, and marked all dates they will not be able to attend. \_\_\_\_\_ **(Initial Here)**

**:: PARENT/GUARDIAN'S QUESTIONNAIRE**

We are thrilled your son or daughter has chosen to apply for Fusion's Summer Mission Trip. This experience can be invaluable in their personal and spiritual development. We want to make sure you understand what they are signing up for so you will be able to support them in this process. We would also appreciate your input on your teen as we walk through the selection process.

**Please answer the questions below and attach additional sheets if necessary.**

1. Do you regularly attend Living Word Community Church?  Yes |  No
2. Do you have any concerns/reservations about your teen serving on the mission week?
3. Does your teen have any health concerns we should know about?
4. What makes them a good fit for this trip?
5. How do they respond to authorities in their life (parents, teachers, coaches, etc.)?
6. I have read the application and fully support my teen's participation in this trip.  Yes |  No

7. What outstanding questions do you have about this trip?

#### :: PARENT/GUARDIAN'S AFFIRMATION

I understand that the information I have provided on this application will be used to help determine whether my teen is qualified to serve on the mission week he/she has applied for. As such, I affirm that to the best of my knowledge the information on this form is true and complete. If my son/daughter is selected, I understand it will involve covering his/her expenses and my teen investing time to prepare for the ministry responsibilities that will be given for the trip.

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### :: APPLICANT'S AFFIRMATION

I understand that the information I have provided on this application will be used to help determine whether I am qualified to serve on the mission week. As such, I affirm that to the best of my knowledge the information on this form is true and complete. I understand that everything written on my application will remain confidential. Furthermore, I have prayed about applying for this trip and believe the Lord is calling me to serve. If I am selected, I understand it will involve covering my expenses and investing time to prepare for the responsibilities I will be given for the trip. Furthermore, if I am selected, I commit to the following:

- I will attend all team preparation meetings. I have noted any potential conflicts I may have on the previous page.
- I will complete all the assigned training assignments on time.
- I will read all team emails thoroughly and respond in a timely manner.
- I will respect, honor, and obey my team leaders and their decisions.
- I will maintain a positive and joyful spirit committed to loving and serving others.
- I will be in prayer for myself, the team, and the people we will be ministering to.
- I understand if I fail to complete these commitments, I may be asked to leave the team.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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After completing this application, please drop it in the student::life dropbox, bring it to the church office, or mail it to the address below **no later than February 2, 2025**. Team selections will be made by February 15, 2026.

Living Word Community Church  
ATTN: Jess Rufle  
2530 Cape Horn Rd.  
Red Lion, PA 17356

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If you have any questions, contact Jess Rufle at [jrufle@lwccyork.com](mailto:jrufle@lwccyork.com) or at 717.755.0089 x 162.

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**Thank you for prayerfully considering Fusion's Impacting York Week!**