



FINANCIAL PARTNERSHIP APPLICATION
Short-term Missions Outreach



Name: _____

Date: _____

Member of New Vision Baptist Church? _____ Yes _____ No

Location of Project: _____

Dates of Project: _____

Total cost of trip:	\$ _____
Your estimated out-of-pocket contributions:	\$ _____
Estimated donations on your behalf:	\$ _____
NVBC financial partnership funds needed:	\$ _____

Briefly describe your call to this ministry project: _____

- ~ I feel God leading me to be His servant with this particular outreach. As a member of a New Vision ministry team, I am asking the church to partner with me prayerfully and financially.
- ~ I understand that I may be interviewed with regard to my intentions and readiness and will accept the Mission Team's decision.
- ~ I understand I may be asked to participate in fund raising activities to help raise the necessary funds.
- ~ Upon my return, I am willing to participate in opportunities meant for me to share with my New Vision financial and prayer partners about what God did in and through my life as a result of the outreach.

Signed: _____ Date: _____

Mission Team Action

Yes: _____ No: _____ More Info Needed: _____

Amount of financial partnership: _____ Funding partnership sent on: _____