

Healthy Church Healthy Belize

Travel Application

To apply to be on a team, complete this form and mail or fax it to:

Healthy Church Healthy Belize
236 North 11th Street | Akron, PA 17501
Fax: 717-859-2613

Personal Data:

Name of Applicant

Address

City

State

Zip Code

Country

Telephone Number

E-mail Address

Today's Date

Please indicate which team you are interested in traveling with:

Medical Team Ministry Team Work Team

What dates would you be interested in traveling?¹ _____

For Medical Teams: Check one Physician Nurse

Other _____

Hospital affiliation

.....
For Ministry Teams: Church Affiliation _____

.....
Name of church where you attend _____

.....
For Work Teams: Do you have experience in any specific area?

Sending us this form in no way ensures you will be traveling with us. We reserve the right to approve applicants for teams. Please wait for us to contact you.

¹ You may list any travel dates already scheduled or any other dates you would be able to travel. We can't promise we would be able to travel on the dates you specify, but this gives us an idea of when to plan the next trip.