



## SERVE OUR WORLD APPLICATION PACKET :: ADULT

When submitting your application, make sure you include:

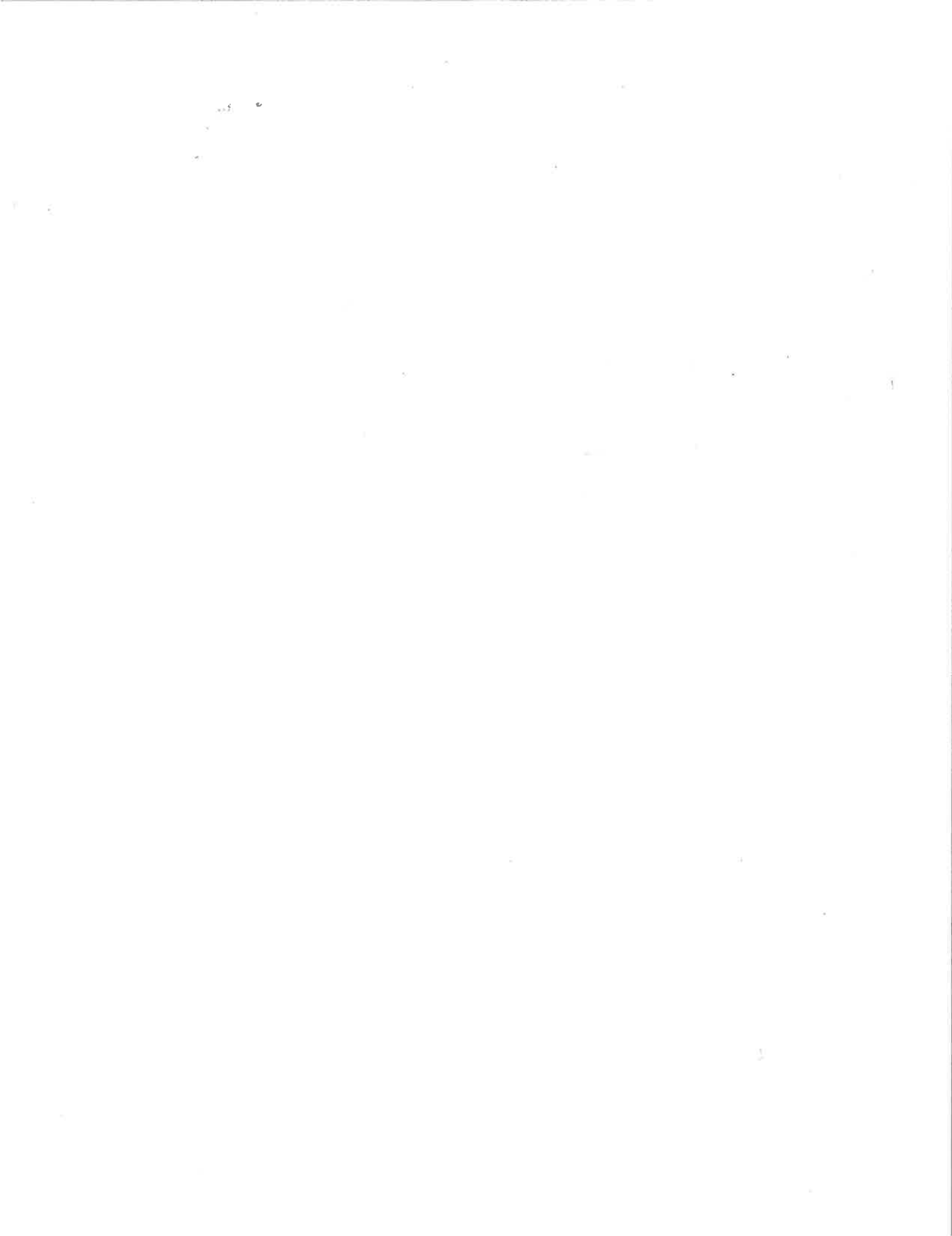
- Application filled out to the best of your ability
- Covenant signed and Cornerstone Values initialed (Page 4)
- Signed by you (Page 5)
- **Notarized** Assumption of Risk form (Page 6)
- Background form filled out and signed (provide copy of ID) (Page 7)
- Copy of Passport (If you have applied and are waiting, please note on application)
- Check, money order, or cash deposit (check or money order made out to Cornerstone)
- **Incomplete application packets will be returned.**

Completed application packets can be turned in at the following locations:

- Cornerstone Office, 2211 E. Pecos Rd., Suite 2, Chandler, AZ 85225. Open Monday-Thursday 8:30-4:30
- Sundays in a sealed envelope marked "missions" into the offering towers; at the San Tan Campus Info booth; at the Scottsdale Campus Info Booth

**Applicants will be notified via email if their applications have been approved.**

If you have any questions, please feel free to contact us via email [missions@cornerstoneonline.com](mailto:missions@cornerstoneonline.com) or call 480-726-8000.





## MEDICAL INFORMATION

Do you have any known allergies (food, drug, other)?	Yes	No
Are you currently taking any medications?	Yes	No
Are you currently receiving medical treatment or under medical observation for anything?	Yes	No
Do you have any limitations or significant health conditions that may affect your involvement with a mission trip?	Yes	No

If you answered "yes" to any of these questions, please briefly describe the situation:

Are you covered by personal/family medical insurance?	Yes	No
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If yes,  
Name of insurer: \_\_\_\_\_  
Policy or group number: \_\_\_\_\_

## YOUR STORY

Tell us about your faith story. Have you said YES to Christ? If no, tell us a little about your story. If yes, what is He teaching you now as you walk with Him?

Do you consider yourself a follower of Jesus Christ?    Yes   No   Deciding

What would you say if someone asked you, "How do I become a Christian?" What truths or steps would you use

Have you ever participated in a mission trip before? Yes/No  
If yes, please describe your experience both positive and negative, if any.

## COVENANT

I recognize that a good attitude is invaluable to the morale and momentum of the team, therefore:

- I will participate in all team meetings and trainings
- I will have a positive attitude during service projects
- I will have a flexible attitude and a servant's heart
- I will obey the leadership
- I will respect the work that is going on in the country with the churches, organizations or persons with whom we are working
- I will not purchase or use alcohol, drugs, or tobacco during my team experience
- I will follow safety precautions at all times during the trip
- I will avoid using vulgar language, curse words, inappropriate humor and participating in inappropriate conversations
- I will remember not to be exclusive in my relationships
- I will dress modestly and appropriately
- I will never be alone with a minor without expressed permission regardless of gender

Financial Responsibility:

- I understand that any fundraising monies raised in excess of my trip balance will be used to benefit the overall mission project and team
- I understand that I will not be reimbursed for any excess fundraising monies that I have raised
- I understand that all monies given toward a mission trip, including the initial deposit, are tax deductible donations and are non-refundable
- I understand that if I am not able to fully fundraise my trip, I am responsible for the balance on or before the due date or my trip may be forfeited

Personal Life:

- My lifestyle reflects biblical values

By signing this covenant, you are indicating that you fully understand and agree with all of the above statements:

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

## CORNERSTONE VALUES

At Cornerstone, everyone is welcome to attend and discover more about Christ! Our mission trips are a place of influence and reserved for believers in Christ living a biblical lifestyle. Therefore, we ask participants to refrain from the involvement in the following activities:

Adultery	Exodus 20:14
Murder	Genesis 9:6
Stealing	Exodus 20:15
Homosexuality	Romans 1:25-28
Transsexual behavior	Deuteronomy 22:5
Sexual Promiscuity (pornography, etc.)	1 Corinthians 6:18-20
Living together when not married	1 Corinthians 7:1-4, 8-9
Child Molestation	Matthew 18:1-6, 10
Abusive behaviors (Substance, physical, sexual emotional)	Galatians 5:22-23; 1 Corinthians 6:19-20
Continuous Slander	Proverbs 16:28; 1 Peter 2:1
Disobedience to civil authority (felony)	Romans 13:1-5
Involvement in Witchcraft or Demonology	Deuteronomy 18:10-13

My lifestyle and views align with the values of Cornerstone.

Initial

## SUPPLEMENTAL INFORMATION

What languages do you speak, and at what level?

Why do you want to go on a mission trip?

**IF APPLICABLE:** Do you have a KTN / TSA Pre-Check Number or seat preference? If so, please list them below. Seat preference is not guaranteed with group travel.

## BACKGROUND INFORMATION

Have you ever been convicted of a misdemeanor or felony?	Yes	No
Has your drivers license ever been suspended or revoked?	Yes	No
Have you ever been accused or convicted of any form of child abuse?	Yes	No

If you answered "yes" to any of these questions, please briefly describe the situation:

## SIGNATURE

*I certify that all the answers given are true and complete to the best of my knowledge:*

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

Please sign this page in the presence of a notary.

**ASSUMPTION OF RISK, WAIVER, AND RELEASE AGREEMENT**

1. I, the undersigned, recognize and acknowledge that Cornerstone Christian Fellowship is a charitable, non-profit corporation engaged in human services and relief activities. I desire to, and have chosen to, participate in such activities.
2. I understand that any travel, volunteer activity, work, or other activities I undertake in connection with Cornerstone Christian Fellowship, partnering agencies, organizations, or individuals involve and present inherent risks, including but not limited to, loss or damage to property, disease, illness, injury, exposure, physical and mental harm, and death that no amount of care, caution, instruction, or expertise can eliminate. I further understand the nature of such risks which may be caused by, among other things, the elements, bad actors, organisms, environmental conditions, crime, accidents, negligence, and political conflict including civil war, war, and terrorism.
3. I, the undersigned, for myself and my heirs, do upon recognition of the potential dangers and nature of the activities involved with their inherent risk, and for the opportunity to voluntarily participate in such activities, by signature below, agree to hereby freely and knowingly assume the risks and further waive any and all actions, causes of actions, claims, and demands for or by reason of loss of life, bodily injury, including, but not limited to, the contraction of any endemic diseases, costs, damage, or expense for any act or omission on the part of the third party or on the part of Cornerstone Christian Fellowship or any of its officers, agents, servants, or employees for anything in any way arising from or connected with, either directly or indirectly, any volunteer activities of the undersigned volunteer of Cornerstone Christian Fellowship. I further agree to release and discharge Cornerstone Christian Fellowship, and its directors, elders, officers, employees, and agents from liability. I covenant with them that I will never, individually or as legal guardians or parent(s) of participating individuals, institute any action at law or in equity for any personal injuries, or injuries to property, real or personal, caused by, or arising out of mission projects and other activities of Cornerstone Christian Fellowship, its successors and legal representatives. I further agree to indemnify and hold Cornerstone Christian Fellowship harmless against any and all costs, damages, and expenses, which may be incurred by them as a result of any lawsuit I might file against them. No principle, officer, agent, employee, or other person associated with or acting on behalf of Cornerstone Christian Fellowship, partnering agencies, organizations, or individuals has disavowed or contradicted anything in this document including the statements regarding the existence and nature of risks involved.
4. This agreement is intended to be as broad and inclusive as permitted by the laws of the State of Arizona. This agreement is to be governed by the laws of the State of Arizona. If any portion of this agreement is held invalid, it is agreed that the remainder shall nevertheless continue in full force and effect.
5. I enter into this agreement freely and voluntarily in consideration of the permission to participate in the activities described herein and of the benefits associated with such activities. I understand that the agreement is contractual and binding upon me.

I have read this document and understood and agreed to all of its contents before signing it. I have also had every opportunity necessary to ask questions concerning the risks and hazards I am assuming in each of the countries I will visit or work in. I also have had adequate time to review, analyze, and think of his document's contents, before signing the document.

I certify the above information is correct and I READ THE ASSUMPTION OF RISK: AGREEMENT OF WAIVER, RELEASE AND HOLD HARMLESS IN AN EMERGENCY. I give my permission to a licensed physician to hospitalize, anesthetize, or perform surgery as needed. I understand that every reasonable effort will be made to contact my family before these actions are taken.

Applicant/Participant's Printed Name: \_\_\_\_\_

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

**FOR NOTARY USE ONLY: AFFIX NOTARY SEAT AT THE LEFT OF PAGE**

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

Subscribed, sworn to and acknowledged before me by \_\_\_\_\_, whose identity was proven to me on the basis of satisfactory evidence to be the person who they claim to be, and acknowledged that they signed the above/attached document, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

\_\_\_\_\_  
My commission expires



# CORNERSTONE

## CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK IN COMPLIANCE WITH THE FAIR CREDIT REPORTING ACT

Name: \_\_\_\_\_  
(first) (middle) (last)

Previous Names:(alias, maiden, etc.) \_\_\_\_\_ Circle One: Male / Female

Date of Birth: \_\_\_\_\_

I, \_\_\_\_\_, am an applicant for a volunteer position at Cornerstone Christian Fellowship. I have been advised that a part of the application process, Cornerstone Christian Fellowship conducts a thorough criminal history background check. I do hereby consent to allow Cornerstone Christian Fellowship use of any information provided during the application process in performing the criminal history check. Cornerstone Christian Fellowship has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to allow me to volunteer. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of Cornerstone Christian Fellowship under the Fair Credit Reporting Act. I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information.

Our policy at Cornerstone requires a criminal history background check be completed for reasons like the safety of our children/students, data and finances. Thank you for participating.

**We will be sending you an electronic request form for you to be able to complete this background check. Please look for this request in your email inbox.**

### APPLICANT'S STATEMENT

The information contained in this *Background Check Form* is correct to the best of my knowledge. I understand that all information contained in this application will be kept confidential.

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

### WHEN FORM IS SUBMITTED

Provided valid photo ID to verify NAME and BIRTHDAY:

YES NO

Staff Initials \_\_\_\_\_

