

CCA High School

Costa Rica Missions Trip

June 6 - 16, 2019

Trip Objectives

- Encourage believers in the San Jose, Costa Rica area
- Minister to Costa Rican people
- Possible activities include:
 - Conduct Vacation Bible School activities in local schools
 - Kid's Club
 - Host evening fiestas to reach local families
 - Distribute food baskets
 - Complete small work projects
 - Participate in the worship services

Trip Overview

- Dates: June 6 - 16, 2019
- Cost: \$1850 (does **not** include cost of passport or personal souvenirs)
- Deadline to apply for the trip – November 15
- Passports **are** required; the expiration on the passport must be **AFTER** January 31, 2020.
- Mrs. Keller **must** have a copy of your passport **NO LATER THAN** March 1.
- The team will work together to coordinate fundraising efforts for both individual and ministry expenses.

Leadership

- Pam Keller – CCA teacher

Payment Schedule

- \$250 due with registration on November 15
- \$250 (Total of \$500) by January 15
- \$250 (Total of \$750) by February 15
- \$350 (Total of \$1100) by March 15
- \$350 (Total of \$1450) by April 15
- \$400 (Total of \$1850) by May 15
- Initial deposit will be refunded if the student is not selected to go on the trip.
- Additional payments are **non-refundable** and will be considered a donation if the student does not go on the trip.
- Donations made for students will be treated according to 501c3 tax guidelines.

Key Dates

- November 15 Student Application Packet and Deposit Due
- January 25 Homecoming Dance Fundraiser (all Costa Rica team members and parents are expected to assist with Homecoming)
- June 6 depart for Costa Rica
- June 16 return

The team will have regularly schedule meetings throughout the school year during the school day as well as 1-2 Saturday training days in the Spring.

Chapelgate Christian Academy
Costa Rica Missions Trip Application Checklist
Trip Dates: June 6 – 16, 2020
Packet Due Date: November 15

Participant's Name: _____

Following is a checklist for the Chapelgate Christian Academy Costa Rica Mission Trip application packet. Please make sure that ALL items on this list are completed prior to submitting the packet. All completed forms and the \$250 payment should be given to Mrs. Keller or turned into the CCA school office. The forms may be found on the CCA Portal. Payment may also be made via the CCA Portal.

Requirements for Costa Rica Missions Trip Application Packet
(please submit the forms in the following order):

- _____ **This COMPLETED checklist should be on top of the packet.**
- _____ Form #1 - Costa Rica Team Member Data Sheet
- _____ Form #2 - Short-Term Mission Application
- _____ Form #3 - Individual Health Information Form (student or chaperone form)
- _____ Form #4 - Behavioral Contract Form
- _____ Form #5 - Support Responsibilities Form
- _____ Four copies of passport photo page (if available); if you do not have a passport, date that you will apply for one_____. Passport copies **MUST** be submitted by March 1. The expiration date must be after January 1, 2021.
- _____ **\$250** deposit (Checks should be made payable to CCA)

There will be three additional forms available in January which must be completed in order to go on the trip. Both forms will need to be notarized; both parents will need to be present to have the forms notarized.

Medical Forms should be returned to the nurse on or before May 17, 2020 to include completed medication order forms from your student's doctor for any/all medications your student may need on a daily or an 'as needed' basis. Medication orders are needed for prescription and over-the-counter medications.

**This sheet and all application packet items are due to Mrs. Keller by
November 15.**

Costa Rica 2020 Team Member Data Sheet

Full Name as it appears/will appear on your passport

Passport Information

- # _____
- Country of Issue: _____
- Date of Issue: _____
- Date of Expiration: _____ (MUST BE AFTER JANUARY 1, 2021!!!!!!)

Email

Student _____

Parents/Guardians _____

Phone Number

Student _____

Parents/Guardians _____

T Shirt Size _____

Basic traveler's insurance is purchased for each team member.

Please give full name of desired beneficiary: _____

If you have any questions please call Pam Keller at 443-974-4313
or email: pkeller@chapelgateacademy.org.

Chapelgate Christian Academy

Costa Rica Mission Team Application

2600 Marriottsville Rd
Marriottsville, MD 21104

Name _____ Grade _____

1. Do you attend church on a regular basis? _____ Please explain your answer. _____

2. What is the name of your church? _____

3. What is your definition of a Christian? _____

4. Do you define yourself as a Christian? Why or why not? _____

5. Do you consider yourself to be a follower of Jesus? Please explain your yes or no answer.

6. What makes you want to be a part of this mission team? _____

7. What do you think will be the hardest part of the trip for you? _____

8. What experience, if any, do you have with mission projects? If you went to Costa Rica with Chapelgate in the past, what have you done differently since your return?

9. What previous ministries have you been involved with, and in what ways? _____

10. What do you hope to learn while on this trip? _____

11. Please feel free to leave any additional comments here: _____

Student Signature _____

Student Health Information Form

Name: _____ Gender: _____ Date of Birth: _____

Pediatrician/Primary Health Care Provider:

Name: _____ Phone Number: _____

Please list **medications** that your student takes:

To the best of your knowledge, has your student had any of the following **health concerns**?

	Yes	No	If yes, describe:
Prematurity			
Birth defect			
Immunity problems			
Bleeding problems			
Lead poisoning			
Sickle Cell Disease			
Diabetes			
Anaphylaxis			
Seasonal allergies			
Food allergies			
Behavior/emotional problems like ADHD, Anxiety, Depression			
Concussion or traumatic brain injury			
Migraines			
Learning problems/disabilities			
Seizures			
Speech problems			
Ear or hearing problems			
Eye or vision problems			
Dental problems			
Asthma or breathing problems			
Heart problems			
Stomach problems			
Bowel problems			
Bladder problems			
Musculoskeletal problems			
Limited physical activity			

Hospitalizations:

Date(s)	Reason(s)

Surgeries:

Date(s)	Reason(s)

Date of last tetanus vaccination: _____

Please note that your student must have documentation of a current *tetanus vaccination* and complete *physical examination* on file with the school nurse prior to June 1, 2020. This physical examination must be dated on or after April 1, 2019.

Parent Name: _____

Parent Signature: _____ Date: _____

Behavioral Contract Form
Costa Rica Mission Trip
June 6 – 16, 2020

In order to be a positive ambassador for Christ and my school, and in order to ensure a positive experience for everyone in the group, I agree to abide by the following rules and behavior guidelines. I understand that failure to abide by these rules may result in my being sent home early (at my parent's expense).

1. I will demonstrate a positive and supportive attitude (even though I may be hot, tired or hungry).
2. I will show respect to the chaperones, the bus driver, and others in authority.
3. I will respect the rules of the Mission House, the Kuzdas ministry, restaurants, and other venues.
4. I will be responsible for carrying and spending my own money in a responsible manner.
5. I will dress appropriately at all times (see guidelines for dress). I will pay attention to know which shirt to wear when we go out as a group.
6. I will be on time for all activities.
7. I will be in attendance at all meals.
8. I will be with a chaperone at all times.
9. I will not bring a laptop, iPad, or other device with me.
10. I will not bring my phone to the ministry areas outside of the Mission House.
11. I will not leave my room after curfew.
12. If I am a boy, I will stay out of the girls' rooms.
If I am a girl, I will stay out of the boys' rooms.
13. I will stay in my assigned room (difficulties with roommates should be brought to the attention of the chaperones).
14. I will not drink alcohol, smoke, or partake of illegal substances or have any of these substances with me at any time. (this includes not purchasing any of these items in Costa Rica)
15. I will not take sports equipment (lacrosse, skateboards, baseball bats, etc) with me on this trip.
16. I will respect the standards of CCA in regards to public displays of affection.

By signing this contract, I agree to abide by these rules.

Student

Date

By signing this contract, I indicate that I have discussed these rules with my son/daughter and will support the chaperones in upholding these rules.

Parent/Guardian

Date

Costa Rica 2020 Support Responsibilities

1. Do you understand that you are responsible to pay the entire cost of this project or raise your support according to the guidelines of Chapelgate's Short-Term Mission Policy?

Signature

Date

2. Will you submit yourself and agree to work under the leadership and direction of those in charge of this project?

Signature

Date

3. Will you promise to follow Matthew 18 principle (Matthew 18:15-17) in all matters concerning conflict resolution?

Signature

Date