

MIRACLE MISSION TO Portugal 2024 (September 9th – 18th)

Sponsored by: Revival Explosion Ministries

APPLICATION INSTRUCTIONS

2221 C E Parham Rd * Richmond, VA 23228 * +1 (804) 365-2655/+1 (804) 319-9227 * www.revivalexpllosion.com

<p>Dear Applicant,</p> <p>Thank you for your interest in traveling with the “Miracle Mission to Portugal 2024” Sponsored by Revival Explosion Ministries!</p> <p>Attached is an application along with various forms and releases that MUST be completed to ensure your acceptance as a Ministry Team Member.</p> <p>The following is a table of required documents:</p>	Application	Deposit Form	Liability Release	Discipline Policy	Ministry Team Training	Pastor’ s Evaluation	Confidential Evaluation	Affidavit of Temporary Guardianship (If you are younger than 18 years of age)	
IF YOU ARE CURRENTLY A PAID, PASTORAL STAFF MEMBER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				
IF YOU ARE AN INDIVIDUAL ACCOMPANIED BY YOUR PASTOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
IF YOU ARE TRAVELING WITHOUT YOUR PASTOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	

Some information required may be rather personal to you, but reasonable considering the scope of such a ministry trip.

Often, the first time a team member can be personally encountered is at the airport, as the team gathers in route to the ministry location. Therefore, it is imperative that we have prior knowledge of each applicant’s personal background before approval can be granted for team participation. Please be assured that all information provided is kept strictly confidential within the leadership of **Revival Explosion Ministries**.

Please send all completed forms to the address captioned above. A **mandatory deposit** reserves your space on the ministry trip pending review and approval of your application.

If a deposit is not received with your application, your application will not be processed. Please make checks or money orders payable to: **Revival Explosion Ministries**. Deposits and/or full payment may be made by credit card. However, all payments must be paid in U.S. dollars or the equal amount in any other currency.

One of our representatives will contact you by phone or e-mail once we receive your application.

If you experience any uncertainty during the application process, or if you have any questions, please call us at +1 (804) 365-2655/+1 (804) 319-9227 or e-mail us at office@revivalexpllosion.com . You can also visit our website at www.revivalexpllosion.com for any additional information.

We are excited about your desire to join us in bringing the Gospel of the Kingdom to every creature! May you be blessed by God’s favor as you seek first His kingdom!

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MINISTRY TRIP AWARENESS

Ministry Teams

Everyone on the trip functions as one team. On a few occasions, we may divide up into smaller groups to minister as it is needed. In addition, each person will be a part of a smaller team of about 6-8 people, including a team leader, to have meals, pray and share testimonies together. These smaller teams are formed randomly by our ministries to encourage interaction by those who do not yet know one another.

Ministry Conditions

The pace required on these trips can be rigorous, emotionally draining, and physically exhausting. Each team member must be able to meet the physical, emotional, and mental challenges with stamina that will be presented in various conditions while ministering. Flexibility is crucial to functioning as a team. We ask that you be prepared to be stretched beyond yourself and to go outside of your comfort zone. However, the harvest of souls and lives that will be impacted because of our "sacrifice" are of priceless value!

Ministry Meetings & Outreach

On this trip we will be focusing on three areas: Salvation to the lost, mercy to the poor, and revival to the church. We will also hold meetings and conferences where there is a great focus on healing and outpouring of the Holy Spirit. You will be chosen for a team and will help in different areas of ministry as you are instructed.

Cities To Be Visited on This Trip

On this trip we will land in Lisbon, then follow to minister in Albufeira and Vila Real de Santo Antonio in an area known as Algarve.

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Terms and Conditions

What is covered?

The cost of the trip includes round trip airfare from the US (Leaving from DC) to the destination country (for US travelers – If you need to leave from a different city or country we will make arrangements) – **when paid in full by the due date**. Our departure date to Portugal is on September 9th , and our departure back is September 18th, 2024.

If you are coming from another country other than the US we can also arrange that. Please message us.

There may be some small variation in price depending on which country you're coming from because of airline tickets. If big fluctuations in the market occur, we will adjust the price of the package accordingly.

Also included is your quality hotel room with breakfast, all internal transportation (involving the ministry team), and administrative fees. The deposit reserves your spot on the trip based on completed application and acceptance. **We reserve the right to deny any application that does not fit the conditions we explain in this form.**

*If you plan to leave out of another airport please get in touch with us for arrangements. This can be arranged but we need to be aware of the plans.

What is not covered?

You will be responsible for your personal spending money, the cost of snacks and additional meals (Lunch and Dinner) as needed, gratuities where appropriate, and immunizations where required. Please note that we work diligently to obtain optimum prices. However, we would like to inform you that this price is subject to change depending on the rate between the US Dollar and the Euro.

Important payment info:

- A non-refundable deposit of US\$ 300.00 is required with the application.
- The full trip payment for the package is **\$2,680.00 (which already includes your deposit)**.
- **Early Bird Option if paid by May 3rd: \$2,480 (which already includes your deposit)**
- **Payment Plan:** It is possible for you to pay the trip in installments in up to 4 times depending on which month you sign up. Message us and we will give you the best plan for you. As soon as you sign up message us so we can arrange the best plan.

Other comments: When planning trips to a foreign country up to a year or more in advance, it is VERY important that we remain flexible. Note: trip expenses may be allowed as a tax deduction because of the missionary nature of the trip.

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Questions and Answers

Q. Can I travel from another country and join with the team?

A. Anyone can travel to the meetings in any part of the world and attend the meetings. However, if you would like to be on our team, we ask that you would fill out the application and follow all the instructions as indicated.

Q. Can I travel on my own and not use your travel agent?

A. It is our policy to allow a team member to make their own travel arrangements (not use our travel agent) for only one of the following cases:

1. You have an Airline "Buddy Pass" with another team member.
2. You are using Frequent Flyer Miles.
3. You are authorized to use an Airline Employee Discount.

If you qualify for one of the above, you must also understand that you will be responsible to get all the way to the destination city (sometimes you may have to pay a connection fee in the destination country) and be at the airport or hotel in the city where we are ministering at the time the rest of the team is arriving. If you are not at the airport during the time the other team members arrive, you will be responsible to connect up with the rest of the team and pay all costs associated with making this connection. If there are any internal flights or car rides, you will also be responsible to make these arrangements. **Please contact the office for further information regarding the group price of the hotel and other amenities provided in the trip cost.**

Q. Can I have a single room on the trip?

A. Usually no, but exceptions can be made. Roommates are an important part of the trip and we don't want you to miss out on that fellowship. We will consider making an exception depending on room availability. **You should e-mail us and explain the reason you would like the single room and cannot stay with others. Of course, if it is approved, there will be an additional cost that will be incurred, and you will pay this extra cost for your trip.**

Q. Can I leave for the trip early or stay later than the rest of the team?

A. Yes. Just let our staff know when you would like to arrive and leave so they can make your flight arrangements accordingly. **You will be responsible for your own transportation to or from the hotel.** If you would like to arrive at the hotel earlier or stay later, please e-mail us and we will confirm those arrangements for you. However, **you are responsible for all costs associated with a longer stay.** If you need to leave early, we will adjust your price accordingly.

Q: Can we sign up as a group for the trip?

A: YES! We welcome groups on our international trips, whether they are organized by a church, some other ministry, or if it is simply a group of friends. Give your group a name and put this group name on each application or correspondence you submit to our office. **However, we ask that all payments to our office be done individually through the methods we provide.** If the church or ministry is making a payment toward one or more individuals, be sure that it is clear stated how much for each person.

On the trip itself, you will be able to choose roommates if you wish. You may also meet during free times for fellowship. On the trip, we do form "teams" with team leaders. Our experience on past trips has taught us that it is better if we mix up your group with others on the trip instead of your group forming its own team. Married couples are placed on the same team.

MINISTRY TEAM APPLICATION

I AM APPLYING FOR ACCEPTANCE AS A MINISTRY TEAM MEMBER FOR:

Algarve, Portugal

September 9th - 18th , 2024

DESTINATION (CITY, COUNTRY)

DATES

NAME

(EXACTLY AS IT APPEARS ON YOUR PASSPORT)

NICKNAME*

NOTE: *ASTERISKED FIELDS WILL APPEAR ON NAMETAG

DATE OF BIRTH___/___/___ GENDER Male Female OCCUPATION_____

STREET ADDRESS_____

CITY*_____ STATE*_____ ZIP_____

PHONE NUMBERS

HOME (_____) _____ WORK (_____) _____

FAX (_____) _____ CELL (_____) _____

EMAIL_____ PASSPORT NUMBER _____

COUNTRY OF ISSUE _____

EMERGENCY CONTACT NAME_____

RELATIONSHIP_____ PHONE NUMBER(_____) _____

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SUPPLEMENTAL APPLICATION INFORMATION

ARE YOU BORN AGAIN? Yes No Unsure ARE YOU SPIRIT-FILLED? Yes No Unsure

ARE YOU WILLING TO MINISTER CONSISTENT WITH OUR MINISTRY GUIDELINES? Yes No

ARE YOU WILLING TO SUBMIT TO BEING MONITORED AND LOVINGLY CORRECTED IF NECESSARY? Yes No

IF MARRIED, DOES YOUR SPOUSE SUPPORT YOUR PARTICIPATION? Yes No

IF MARRIED, WILL YOUR SPOUSE BE JOINING THIS TRIP? Yes No SPOUSE'S NAME _____

DO YOU HAVE ANY PHYSICAL DISABILITY? Yes No IF SO, PLEASE DESCRIBE

HAVE YOU EVER BEEN TREATED FOR ANY MENTAL/EMOTIONAL CONDITION? Yes No IF SO, PLEASE DESCRIBE _____

PLEASE LIST ANY CONDITION THAT MAY LIMIT YOUR PARTICIPATION AND ANY MEDICATIONS YOU ARE CURRENTLY TAKING _____

PLEASE LIST ANY ALLERGIES TO FOOD, MEDICINE, ETC. _____

IT IS HIGHLY RECOMMENDED (NOT MANDATORY) THAT YOU CARRY OR OBTAIN PRIMARY MEDICAL INSURANCE TO COVER POSSIBLE ADDITIONAL MEDICAL NEEDS THAT MAY ARISE DURING INTERNATIONAL TRAVEL.

DO YOU HAVE PRIMARY MEDICAL INSURANCE? Yes No IF SO, WHAT IS THE NAME OF YOUR INSURANCE CARRIER? _____

HOW WOULD YOU DESCRIBE YOUR TEMPERAMENT? _____

CHURCH NAME _____ DENOMINATION _____

CHURCH ADDRESS _____

CITY _____ STATE _____ ZIP _____

CHURCH PHONE (_____) _____

HOW LONG HAVE YOU ATTENDED? _____

NAME OF PASTOR _____ PHONE (_____) _____

DO YOU ATTEND CHURCH REGULARLY? Yes No

HAVE YOU BEEN WATER BAPTIZED? Yes No HAVE YOU BEEN BAPTIZED IN THE HOLY SPIRIT? Yes No

IN WHAT AREAS OF CHURCH LIFE ARE YOU CURRENTLY SERVING OR HAVE YOU SERVED IN THE PAST?

IS YOUR PRESENT INCOME DERIVED FROM BEING IN FULL TIME CHRISTIAN MINISTRY? Yes No

WHAT DO YOU BELIEVE ARE YOUR SPIRITUAL GIFTINGS? _____

WHAT DO YOU BELIEVE ARE YOUR NATURAL TALENTS & ABILITIES?

HAVE YOU RECEIVED ANY CHRISTIAN MINISTRY TRAINING? Yes No

IF SO, PLEASE DESCRIBE _____

ARE YOU FLUENT IN ANY LANGUAGES OTHER THAN ENGLISH? Yes No

IF SO, NAME LANGUAGE(S) _____

I, _____, DECLARE THAT THE INFORMATION PROVIDED BY ME IN THIS APPLICATION IS TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE REVIVAL EXPLOSION MINISTRIES TO VERIFY ANY AND ALL INFORMATION PROVIDED ABOVE.

SIGNED: X _____ **DATE** ____/____/____

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DEPOSIT FORM

PLEASE NOTE: YOUR APPLICATION FOR THE "MIRACLE MISSION TO PORTUGAL 2024" TEAM PARTICIPATION CANNOT BE PROCESSED UNLESS THE DEPOSIT AMOUNT IS INCLUDED WITH THIS FORM.

I, _____, WISH TO BE CONSIDERED AS MINISTRY TEAM MEMBER FOR:

DESTINATION (CITY, COUNTRY)

DATES

DEPOSIT AMOUNT INCLUDED: \$ _____ (**\$300 PER PERSON PER TRIP**)

Make checks payable to: **REVIVAL EXPLOSION MINISTRIES**. If paying by credit card please provide your credit card information below. Your deposit can be made by credit card at no extra charge.

CANCELLATION & REFUND POLICY

If for some reason you cancel your trip within 4 weeks of your departure date or after we have paid for your air flights, you will not be refunded for your ticket price. However, it is often the case that the ticket can be reused in the future at your convenience; we will forward the ticket for you. In addition, you will **not** be refunded money that Revival Explosion has paid out on your behalf to secure hotel and transportation. Any amount over and above the deposit, airline ticket, and reservation money spent on your behalf will be refunded to you.

I understand and agree to the above cancellation and refund policy. If paying the deposit by credit/debit card, I authorize the above amount to be charged to my credit/debit card.

Signed: _____ Date _____/_____/_____

ENCLOSED IS A CHECK IN THE AMOUNT OF \$ _____ **CHECK #** _____

~ OR ~

PLEASE CHARGE MY CREDIT CARD:

Name _____
(Exactly as it appears on the Credit Card)

Credit Card# _____ CVC# _____ (3 digits on back) Exp. Date _____/_____/_____

Billing Address _____

Amount to be Charged \$ _____

I AUTHORIZE THE ABOVE AMOUNT TO BE CHARGED TO MY CREDIT CARD BY REVIVAL EXPLOSION MINISTRIES.

Signed: X _____ Date _____/_____/_____

Please e-mail, mail, or fax this completed form to:

Revival Explosion Ministries

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Email: office@revivalexpllosion.com Phone: +1 (804) 365-2655/+1 (804) 319-9227

LIABILITY RELEASE

WARNING: THIS IS A COMPLETE RELEASE OF ANY POTENTIAL CLAIMS.

I, _____, **IN CONSIDERATION OF MY BEING ACCEPTED BY REVIVAL EXPLOSION MINISTRIES FOR PARTICIPATION AS A MINISTRY TEAM MEMBER FOR THE FOLLOWING TRIP:**

(Location)

(Dates)

HEREBY DECLARE:

I am 18 years of age or older. (If not yet 18, both youth and parents must initial and sign).

I am in good health and have received or will be receiving all vaccinations recommended by my county or state health department for travel in the countries or areas to be visited on this trip.

I acknowledge that International travel involves danger and risk. I acknowledge that the dangers and risks include, but are not limited to, the hazards of travel by air, boat, raft, jeep, automobile, bus, taxi, bicycle, and on foot, travel in foreign countries, in jungles, mountains, high altitudes, steep terrain; travel and/or attendance at meetings among possibly unfriendly persons; sickness or injury in areas where medical assistance may be primitive or inadequate, unavailable or not readily available, and/or where rapid evacuation is not available; or where there is exposure to crime, to civil unrest and to forces of nature or other dangers. I understand that the above and/or other possibilities are risks in ministry/missions travel.

I acknowledge that **Revival Explosion Ministries** do not accept any responsibility for injury, illness or loss suffered by me, and that all medical or personal expenses in connection with or made necessary by my illness or injury on this trip are my own responsibility.

I hereby assume all risk of personal injury, sickness, or death, and damage to or loss of my personal property, and any delay, change or cancellation of travel arrangements, and any and all other damage or expenses I may suffer as a result of participation in this ministry/mission trip or in activities related to it. I agree to be fully responsible for my actions. Should I become ill or injured or suffer other damage, I will pay all costs involved including costs of evacuation and medical care I might receive.

Please carefully read and sign the next page

IN CONSIDERATION OF MY BEING PERMITTED TO PARTICIPATE AS A MINISTRY TEAM MEMBER ON THE ABOVE MINISTRY TRIP: (Please initial each paragraph)

I ACCEPT AND ASSUME ALL RISKS AND HAZARDS FROM THIS ACTIVITY, BOTH KNOWN AND UNKNOWN, INCLUDING BUT NOT LIMITED TO THE RISKS AND HAZARDS IDENTIFIED ABOVE.

Initial: _____

I HEREBY VOLUNTARILY RELEASE, FOREVER DISCHARGE, AND AGREE TO HOLD HARMLESS AND INDEMNIFY REVIVAL EXPLOSION MINISTRIES, ITS DIRECTORS, OFFICERS, AGENTS, EMPLOYEES, COORDINATORS, FACILITATORS, VOLUNTEERS, AND OTHER TEAM MEMBERS FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, ACTIONS OR RIGHTS OF ACTIONS, WHICH ARE RELATED TO, ARISE OUT OF, OR ARE IN ANY WAY CONNECTED WITH MY PARTICIPATION IN THIS ACTIVITY, WHICH I NOW HAVE OR MAY HAVE IN THE FUTURE, SPECIFICALLY INCLUDING BUT NOT LIMITED TO THE NEGLIGENT ACTS OR OMISSIONS OF ANY PERSON SO RELEASED, HELD HARMLESS AND INDEMNIFIED, AND SPECIFICALLY INCLUDING CLAIMS RELATING TO ANY PERSONAL INJURY THAT I MAY SUFFER.

Initial: _____

I AGREE NOT TO MAKE A CLAIM, FILE SUIT OR DEMAND ANYTHING FOR ANY INJURY, DEATH OR LOSS THAT ARISES FROM MY PARTICIPATION IN THIS ACTIVITY.

Initial: _____

I AGREE TO PAY THE COSTS AND/OR LEGAL EXPENSES INCURRED BY THE TRIP LEADER(S), ORGANIZERS AND/OR PARTICIPANTS AS A RESULT OF ANY CLAIM OR SUIT FILED BY ME, OR FILED BY ANYONE ELSE AS A RESULT OF MY CONDUCT.

Initial: _____

I CONSENT AND AGREE TO PAY FOR ANY MEDICAL TREATMENT RENDERED TO ME BY ANYONE FOR ANY INJURY OR OTHER MEDICAL SITUATION DURING, OR RESULTING FROM, MY PARTICIPATION.

Initial: _____

I AUTHORIZE REVIVAL EXPLOSION MINISTRIES TO ARRANGE FOR TRANSPORTATION AND LODGING FOR ME ON THIS TRIP.

Initial: _____

I AGREE THAT THESE PROMISES, AGREEMENTS, ASSUMPTIONS OF RISK AND RELEASES BIND ME, MY FAMILY, ALL MINORS WITH ME OR ON WHOSE BEHALF I SIGN, AND MY HEIRS OR LEGAL REPRESENTATIVES AND ASSIGNS.

Initial: _____

I HEREBY MAKE EACH OF THE ABOVE STATEMENTS, ACKNOWLEDGEMENTS, AUTHORIZATIONS, RELEASES, DISCHARGES, HOLD HARMLESS AGREEMENTS, INDEMNITIES AND OTHER AGREEMENTS ON BEHALF OF MY MINOR CHILD OR CHILDREN, ACCOMPANYING ME OR PARTICIPATING ALONE ON THIS TRIP WHOSE NAME(S) APPEAR(S) BELOW, AND AGREEE THAT THEY SHALL BE BINDING ON EACH MINOR CHILD, HIS HEIRS, SUCCESSORS AND ASSIGNS:

NAME OF MINOR _____

SIGNATURE OF MINOR _____

I HAVE READ CAREFULLY AND UNDERSTAND THIS LIABILITY RELEASE. I AM AWARE THAT I AM GIVING UP IMPORTANT LEGAL RIGHTS AND SIGN OF MY OWN FREE WILL.

SIGNATURE _____ DATE ____/____/____

PRINT NAME _____

FULL ADDRESS _____

DISCIPLINE POLICY

"If your brother sins, go and show him his fault in private; if he listens to you, you have won your brother. But if he does not listen to you, take one or two more with you, so that BY THE MOUTH OF TWO OR THREE WITNESSES EVERY FACT MAY BE CONFIRMED. If he refuses to listen to them, tell it to the church; and if he refuses to listen even to the church, let him be to you as a Gentile and a tax collector." -Matthew 18:15-17

It is the intent of our ministries to follow the Biblical patterns of discipline within the confines of all international ministry trips. These ministry trips we do are attempting to open up countries to renewal and revival, often attracting spiritual warfare. *1 John 2:1- "My little children, I am writing these things to you so that you may not sin. And if anyone sins, we have an Advocate with the Father, Jesus Christ the righteous." Our goal is to create a safe, healthy environment, in order to minister to the people of the country visited.*

We recognize that ministry team members must be in correct relationship with God and with others, in order to ensure completion of mission objectives. The consequences of one's sin or disobedience have the potential to bring confusion and destruction to any ministry trip. We desire to come along side each ministry team member in loving correction only when necessary. All compliance with any disciplinary action by our leadership team is greatly appreciated.

Below are procedures that will be followed by our leadership, if any disciplinary action is necessary. To avoid any misunderstanding, please read the outlined procedures below, sign the consent form, and return it to our office. By consenting to the following, you agree to receive correction, public rebuke and/or removal, if decided necessary by our leadership. If issues of sin or disobedience come to light, rest assured, the steps below will be followed to bring resolution to the situation.

1. If you have a problem with any individual, you are to lovingly approach that person first, without going to any other ministry team member. Attempt to bring understanding and resolution to the conflict. If it is with someone of the opposite sex, please talk with him or her in a place where others are present, but cannot hear your conversation. Many times what you may consider a problem is simply a misunderstanding and bringing it to their attention often brings resolution.
2. If you find no resolution after you have conversed with the individual, the individuals involved are required to discuss the problem with a ministry team leader. The ministry team leader should be able to determine what the problem is, who is at fault, and bring closure to the situation.
3. If the ministry team leader discovers that there has been no closure to the situation, there will be another meeting with the parties involved, the ministry team leader, and the trip leadership in order bring closure to the difficult situation.
4. If the ministry leadership find any individual to be in *rebellion to correction*, all representatives will be informed. We will bring definite closure to the situation, and all parties will be present to hear the final conclusion of the matter. Possible conclusions may include an individual returning home within 24 hours or being brought before the whole ministry team for public correction. If **absolutely necessary**, the ministry team will be informed not to have any personal contact with the individual throughout the remainder of the trip. The individual will not be permitted to eat, sleep, or travel with any ministry team member.
5. **If any individual is involved in any sin that cannot, at the discretion of leadership, be taken care of in a timely manner or would affect the team in an adverse way, our leadership reserves the right to put procedure (4) into action immediately.**

I AGREE TO FOLLOW THE DISCIPLINE PROCEDURES LISTED ABOVE IF DIRECTLY INVOLVED IN CONFLICT. AS A MINISTRY TEAM MEMBER I AGREE TO FOLLOW THE DIRECTIONS AND DECISIONS MADE BY THE LEADERSHIP REGARDING OTHER MINISTRY TEAM MEMBERS.

SIGNED: X _____ DATE ____/____/____

MEDIA RELEASE

I, _____, IN CONSIDERATION OF MY ACCEPTANCE
FOR PARTICIPATION AS A MINISTRY TEAM MEMBER FOR THE FOLLOWING

TRIP: _____
(Location) (Dates)

Revival Explosion Ministries often take photographs and video footage on ministry trips using them in advertising, promotional materials, website, social media platforms, TV show, and publications. In signing below, you fully authorize us to use video or photographs taken of you in any or all of the above mentioned materials.

I AGREE TO THE MEDIA RELEASE POLICY STATED ABOVE AND WILL ABIDE BY THE TERMS AS STATED.

SIGNED: X _____

DATE ____/____/____

