



# ALUMNI ADULT UPDATE

Camp Code: Office Use

Attach updated  
**PHOTO**  
Here

Paper clip a photo  
Or

Email a photo to  
[office@im-canada.ca](mailto:office@im-canada.ca)

and check here

MINISTRY \_\_\_\_\_ DATES \_\_\_\_\_

LOCATION \_\_\_\_\_

➤ PLEASE ENCLOSE A \$100 COMMITMENT DONATION WITH THIS UPDATE.

NAME \_\_\_\_\_ AGE \_\_\_\_\_

**ADDRESS:**

STREET \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

E-MAIL \_\_\_\_\_

**PHONE:**

HOME \_\_\_\_\_ CELL \_\_\_\_\_ WORK \_\_\_\_\_

**PLEASE COMPLETE:**

I have served on \_\_\_\_\_ (# of) IM trips in the past.

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Briefly describe what's happening in your life at the present time. (Job, school, family, etc.)

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2. What kinds of ministry are you involved in locally at the present time?

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3. What are you praying about specifically for this upcoming ministry? What's your purpose in going back?

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Thank you for answering these questions!

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

International Messengers Canada Society  
PO Box 11022 1945 McCallum Rd.  
Abbotsford, BC V2S 0E4  
604-855-4433 • www.im-canada.ca



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## Criminal Records Check

All short-term staff 18 years of age and over must obtain a Criminal Record Check. After we receive your complete application and both references, we will contact you with directions on how to obtain this check.

**PLEASE NOTE:** Having a criminal record is not a disqualification for short-term ministry with International Messengers. We acknowledge that the power of the Holy Spirit frees believers from the power of sin (Romans 8:2). Jesus said “There is forgiveness of sins for all who repent” (Luke 24:47). We believe “there is no condemnation for those who belong to Christ Jesus” (Romans 8:1). However, we would appreciate full disclosure of any criminal record in this application (see the Personal Character Background page). As a prudent step, we will discuss it with you and seek God’s wisdom and direction in the final evaluation of the application.

There are **two options** for completing the Criminal Records Check. Please check the appropriate box to indicate which method you would prefer when the time arrives.

- At your local police station** (based on your legal residence). It is recommended you call ahead to confirm their individual requirements. You will likely need to present 2 pieces of identification.

Since you are volunteering for a charity the Criminal Record Check may be free. If not, International Messengers will reimburse you for the cost.

- On-line** at [www.backcheck.ca](http://www.backcheck.ca) – this can be accomplished very quickly, requiring 10 - 15 minutes to complete the online application. However, if you are not familiar and comfortable with signing up for online IDs and passwords you may find this option confusing. There is no charge for this option. See a description of the process at <http://vimeo.com/33922358>

A previously obtained Criminal Record Check is acceptable provided it was issued within 2 years from date of application.

- I have a Criminal Record Check issued within 2 years from date of this application and am including a copy with this application.
- I am an alumnus who has previously supplied International Messengers with a Criminal Record Check issued within 2 years from date of this application.

Once we’ve received your complete application, including both references, we will send you further direction regarding obtaining a Criminal Record Check.

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## Ministry, Work Skills & Interest Inventory

NAME \_\_\_\_\_

### I. CHURCH WORK/MINISTRY

	<u>Experience</u>	<u>Interest</u>
Preaching	( )	( )
Leading services	( )	( )
Personal testimony	( )	( )
Evangelistic programs		
Personal witnessing	( )	( )
Bible Study	( )	( )
Street evangelism	( )	( )
Discipleship programs		
Group Bible Study	( )	( )
One to One	( )	( )
Children/Youth Ministry		
(Specify age group) _____	( )	( )

### II. MUSIC

Vocal	( )	( )
Leading Worship	( )	( )
Instrumental		
Piano	( )	( )
Guitar	( )	( )
Other _____	( )	( )

### III. DRAMA

Mime	( )	( )
Plays/Skits	( )	( )

### IV. MISCELLANEOUS

	<u>Experience</u>	<u>Interest</u>
Medical	( )	( )
Field: _____		
Tutoring	( )	( )
Teaching English / TESL	( )	( )
Sports _____	( )	( )

### V. OTHER SKILLS (including foreign languages)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### VI. SPIRITUAL GIFTS

	<u>YES</u>	<u>NO</u>
Encouragement	( )	( )
Administration	( )	( )
Leadership	( )	( )
Evangelism	( )	( )
Teaching	( )	( )
Service	( )	( )
Mercy	( )	( )
Other: _____		

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## Health Insurance/Emergency Contact Information

NAME \_\_\_\_\_ DATE \_\_\_\_\_

HEALTH INSURANCE NAME AND PROVINCE: \_\_\_\_\_

HEALTH INSURANCE NUMBER: \_\_\_\_\_

[ ] ***I DO NOT CURRENTLY HAVE HEALTH INSURANCE.***

I have had all the recommended childhood vaccinations Yes [ ] No [ ]

None [ ] \_\_\_\_\_  
Allergies or medical conditions.

None [ ] \_\_\_\_\_  
Medications being taken or have been taken in the past month.

None [ ] \_\_\_\_\_  
Food restrictions.

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### IN CASE OF EMERGENCY, NOTIFY:

Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Province, Postal Code: _____	Province, Postal Code: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____
Work Phone: _____	Work Phone: _____
Relationship: _____	Relationship: _____

(The information on this form will be shared with IM Staff and Team Leaders)

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• Abbotsford, BC • V2S 0E4 • 604-855-4433 • www.im-canada.ca



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## Liability Release

1. In consideration for being accepted and allowed to participate in this conference/project and activities associated with its program and location, I personally assume responsibility for my actions, and release International Messengers Canada Society (hereafter IM), its Trustees, employees and agents from loss, injury or damage to myself or my property; provided that nothing contained herein shall excuse IM, its Trustees, employees or agents from responsibility to act with reasonable care for the safety of myself or my property.
2. I give permission to IM to share my application information with IM staff and team leaders.
3. I give permission to IM to be photographed, recorded, and/or video taped and to allow this material to be used for publicity.
4. I give permission to IM to obtain medical assistance in the event of an emergency. This permission will include the administration of medicines, surgical treatment, X-ray examination or hospitalization as might be ordered by a licensed medical doctor. I release and discharge IM, its Trustees, employees, and agents from any liability for any first aid rendered or treatment performed pursuant to this consent.
5. I understand that participation in this conference/project may involve the risk of hostage taking or extortion. I release and discharge IM, its Trustees, employees, and agents from any and all liability should I be taken hostage. I further release and discharge IM, its Trustees, employees and agents from any and all liability for failure or refusal to comply with any demand or demands, including the payment of ransom or other extortion, issued through the use of hostage taking or extortion.
6. If I am under age 18 (if you are, please check here ) I state that I am a mature minor (of college age and living away from parent/guardian) and have the capacity to consent to the terms of this Release.

\*For persons under the age of 18 and not living away from parent/guardian:

I, the undersigned parent or legal guardian of the above person, consent to the below named person's participation in this activity and agree to the terms of this release.

\_\_\_\_\_  
**Signature of Parent or Guardian**

\_\_\_\_\_  
**Print Name of Parent or Guardian**

\_\_\_\_\_  
**Date**

7. Should any dispute or controversy arise, I agree to seek resolution according to the Rules of Procedure of the Institute for Christian Conciliation. I certify that I am competent to sign this Release, and have done so voluntarily.

\_\_\_\_\_  
**Signature of participant**

\_\_\_\_\_  
**Print name of participant**

\_\_\_\_\_  
**Date**



## Spouse's Affirmation\*

I have prayerfully considered participating on an evangelistic team with International Messengers Canada Society and have sensed God's call for me to apply. I have discussed my participation plans with my spouse, realizing that his/her affirmation is an essential condition as to whether or not God is actually calling me to go.

Team Member's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I have joined my spouse in prayer that we together would know God's will for him/her to join an evangelistic team with International Messengers Canada Society. As part of the application process, I affirm God's call and am fully supportive of my spouse's application to be a team member.

Spouse's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* This form is not necessary for singles or for couples applying together.

# TRAVEL PREFERENCE FORM



If you are arranging your own travel please complete Part 1 of this form. If you want International Messengers to arrange all or part of your travel please complete both Parts 1 and 2.

## PART 1

Full legal name (exactly as it is or will be on your passport) \_\_\_\_\_

Date of birth \_\_\_\_\_ Gender (circle one) Female Male

Passport number \_\_\_\_\_ Nationality of passport \_\_\_\_\_

Passport expiration date \_\_\_\_\_

Check box if:

- I will be arranging and purchasing tickets on my own (including using my own Frequent Flyer miles). (Before purchasing tickets please contact IM: [gene@im-canada.ca](mailto:gene@im-canada.ca).)
- I may want to travel before or after the camp on my own. **(Please comment below, include dates and cities. Please be specific.)**
- I would like to purchase additional emergency medical insurance for my additional personal travel. (IM purchases emergency medical insurance for your mission trip, including travel to and from North America. If you would like coverage for your additional personal travel the cost is approximately \$1.50 per day, per person.) **By leaving this box blank, you are communicating to International Messengers Canada Society that you do not want to purchase additional insurance for your additional personal travel.**

## PART 2

Preferred departure airport(s): \_\_\_\_\_

Ground travel time to airport(s): \_\_\_\_\_

Frequent flyer #: \_\_\_\_\_ Airline: \_\_\_\_\_

**NOTE: Donations covering the FULL PRICE of airfare is needed prior to purchasing your airline ticket.**

**COMMENTS:** (specify dates and cities for additional travel) \_\_\_\_\_

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**Questions? Please contact Gene at 604-855-4433 or [gene@im-canada.ca](mailto:gene@im-canada.ca)**

Office Use Only: TEAM CODE:
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## Shirt Order Form

Please return form to IM  
or email size and color to:  
office@im-canada.ca

Every International Messengers Team Member will receive a **free** T-shirt. **Please CIRCLE the SIZE and COLOR you would like.**  
(Youth sizes where available are indicated with: <sup>Y</sup>)

**T-SHIRT \$16.00** (GILDAN 100% Heavyweight Cotton 8.8 oz)    Sizes: **XS S M L XL 2XL 3XL<sup>3</sup> 4XL<sup>4</sup>**  
 Royal Blue<sup>3,4,Y</sup> – Red<sup>3</sup> -- Sport Grey<sup>3,4,Y</sup>  
 (Youth sizes<sup>Y</sup> for short-sleeve T-shirts: **XS=2/4 S=6/8 M=10/12 L=14/16 XL=18/20**)

**LONG-SLEEVE T-SHIRT \$17.00** (GILDAN 100% Heavyweight Cotton 6.1 oz)    Adult sizes: **S M L XL 2XL 3XL<sup>3</sup>**  
 Royal Blue<sup>3,Y</sup> – Red - Sport Grey<sup>4,Y</sup>  
 (Youth sizes<sup>Y</sup> for long-sleeve T-shirts: **XS=2/4 S=6/8 M=10/12 L=14/16**)

**SWEATSHIRTS \$27.00** (JERZEES 9oz Heavyweight 50/50)    Adult sizes: **S M L XL 2XL 3XL**  
 Ash<sup>4,Y</sup> - Black<sup>4,Y</sup> – Forest Green<sup>3,Y</sup> - Maroon<sup>3,Y</sup> - Navy<sup>4,Y</sup> - Purple<sup>Y</sup> - Red<sup>4,Y</sup> - Royal Blue<sup>4,Y</sup> - Sport Grey<sup>4,Y</sup> – White<sup>3,Y</sup>  
 (Youth sizes<sup>Y</sup> for sweatshirts: **XS=2/4 S=6/8 M=10/12 L=14/16**)

**SHORT-SLEEVE POLO SHIRT w/Embroidered Logo \$28.00** (6.1 oz Cotton Jersey Knit)    **S M L XL 2XL**  
 Ash - Black - Forest Green - Maroon - Navy - Red - Royal - Sport Grey - White

**SHORT-SLEEVE SHIRT w/Embroidered Logo \$33.00** (Mens and Womens sizes)    **S M L XL 2XL 3XL**  
 Denim (100% Cotton): Faded Blue  
 Twill (55/45 Cotton/Poly): Black – Brown – Forest Green – Khaki - Navy

**LONG-SLEEVE SHIRT w/Embroidered Logo \$38.00** (Mens and Womens sizes)    **S M L XL 2XL 3XL**  
 Denim (100% Cotton): Faded Blue<sup>MT</sup>    **Men's tall = <sup>MT</sup>, Women's tall = <sup>WT</sup>**  
 Twill (55/45 Cotton/Poly): Black<sup>MWT</sup> – Brown<sup>M</sup> – Forest Green<sup>MT</sup> – Khaki<sup>MWT</sup> - Navy<sup>MWT</sup>    **LT XLT 2XLT 3XLT**

**FULL-ZIP FLEECE VEST w/Embroidered Logo \$46.00** (100% Polyester Fleece)    **S M L XL 2XL**  
 Red - Black - Charcoal - Navy - Forest Green

If you would like to order additional items, please indicate size and color above and fill out the form below. **Items will be ordered if payment is received with order form, so please also include a cheque payable to International Messengers Canada Society for the proper amount.** *All prices shown are in Canadian \$.*

ITEM (do not include free item here - circle free item above)	COLOR	SIZE		PRICE
			<b>TOTAL</b>	C\$

**NAME:** \_\_\_\_\_

**TEAM:** \_\_\_\_\_