



New York, NY 2010

Servant Leadership Missions Trip: New York, NY

July 10-17, 2010

Do nothing from selfish ambition or conceit, but in humility regard others as better than yourselves. Let each of you look not to your own interests, but to the interests of others. Let the same mind be in you that was in Christ Jesus. Philippians 2:3-5

What: ministry groups to partner with existing service programs to help others in need and also learn about what it means to be a servant leader. We begin each day with a morning devotional and have evening sessions of worship and messages featuring teachers who relate to the issues and concerns of today's servant leaders. Here's a look at a typical daily schedule:

Breakfast 7:30 – 8:30 am
Morning Devotional 8:30 – 9:00 am
Serve at Worksite 9:00 – 3:30 pm
Clean Up and Free Time 4:00 – 5:30 pm
Dinner 5:30 – 6:30 pm
Evening Session 7:30 – 9:00 pm
Small Group Time 9:00 – 10:00 pm
Free Time 10:00 – 11:30 pm

When: July 10-17, 2009

Where: New York, New York

Who: Any Sr High student currently in 9th, 10th, 11th, or 12th grade.

Cost: The cost is \$600.00 per person (dependent upon the lowest price transportation). This price includes travel, lodging, and meals during the week. It does not include meals/snacks on the way out to New York or on our way back (a total of 8 meals), or souvenirs/activities during our free day in the city. A \$100 non-refundable deposit is due by February 16, 2010. Attached to this packet is a sample support letter for you to use to raise support if you so desire. Also, please be aware that any funds turned in by you personally will be considered a donation to Parkview and will be noted on your annual giving statement.

Once you register for the trip, an account will be set up at church to keep track of your funds. Below is a schedule of when the necessary payments are due for the trip:

<u>Date:</u>	<u>Account Status:</u>
Feb 16, 2010	\$ 100.00
Apr 13, 2010	\$ 300.00
Jun 19, 2010	\$ 600.00

Please note that it's important to have your account up-to-date so that we can finalize trip details. You may turn in funds at anytime; this is *not* a schedule of when to pay, but rather a look at what your account should hold by these dates.

New York, NY Schedule

July 10-17, 2010

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
4	5	6	7	8	9	10 Travel
11 Travel & Check-In	12 Service Projects	13 Service Projects	14 Training & Free ½ day	15 Service Projects	16 Service Projects	17 Travel

New York Missions Meeting Dates

February 6, 2010 – informational meeting 5:30pm in Lower Level classroom #002.

During March through June, there will be New York Missions Meetings concerning the trip. After we get our team spots filled, we will be sending out the training dates for the trip.

Frequently Asked Questions

Do I need to bring money?

You will need money to purchase 8 meals on the trip, and any souvenirs/activities you wish to do on our free afternoon.

What will we be doing?

Lead222 partners with existing ministry and service programs that are already in operation and that will continue on after we leave. The needs of these ministries will dictate which opportunities are available. These could include painting, stocking food pantries, serving the homeless, working in children's programs, construction projects, sorting clothes, cleaning up, serving the elderly and various other jobs.

Where will we be staying?

We will be staying in a hotel during our trip. Specific details will come later!

What do we need to bring?

Students should bring their Bibles and journals. Other considerations might include cameras, free-time entertainment (Frisbees, balls, etc), and whatever else they would like to bring that wouldn't impose on the rights of others and that will fit into your vans. (Also see the Suggested Packing List).

Purpose:

These work projects will serve churches and organizations in a lasting way, while giving you a hands-on opportunity to develop the servant leadership skills they are learning about during the sessions. Students will get a clear understanding of the importance of flexibility and teamwork as they unite together to

accomplish a single task. Students should view this trip as an opportunity to practice some of the leadership skills they are learning as they are confronted with challenging tasks and situations.

Be prepared:

- Remember that you are a guest on these ministry work sites
- Keep a servant attitude - come ready to serve!
- Things may change, so be prepared to be flexible and patient
- Remember to bring refillable water bottles, sunscreen and hats for summer's hot weather

Suggested Packing List

Appropriate Dress: On this mission trip your team will be representing Parkview Christian Church and Christianity, in general; students are, therefore, expected to dress modestly – no short shorts or revealing tops, etc. Males must always wear a shirt of some type. We will be going through the packing list in more detail as the dates draw nearer.

- For Worksites
 - Work gloves
 - Enough work clothes to last the week (old jeans, loose fitting t-shirts, etc)
 - Athletic shoes and socks
 - Sunglasses
 - Sunscreen
 - Refillable water bottle
- Free Time
 - Sweater or jacket for cool weather
 - Nice, casual dress clothes for the Team Time Experience
 - Miscellaneous entertainment (Frisbees, balls, etc)
 - Acoustic guitars or other instruments welcome (please be sensitive to noise)
 - Disposable cameras
 - Money for Team Time Experience, snacks and/or souvenirs; if desired.
- Study and Reflection
 - Bible
 - Journal
 - Pen or pencils
- Hygiene and Toiletries
 - Shower sandals
 - Soap
 - Washcloth
 - Toothbrush
 - Toothpaste
 - Deodorant
 - Shampoo
 - Towel
 - Medicines

Sample Support Letter

**** This is a form letter that you may use to request prayer and financial support. Remember that this is just an example! Please make sure you personalize the ideas within this sample letter – you want the reader to be moved to act based on its content!**

Dear Friends and Family:

I'm excited! This summer I plan to participate in a very challenging ministry. The church which I attend, Parkview Christian Church, offers the opportunity for young people to serve in many different ways by experiencing mission work first hand. One of the opportunities available to me is to participate in a missions trip to _____ . It is a ministry of spreading the good news of Jesus Christ, uplifting and supporting dedicated missionaries, accelerating spiritual growth, and above, all providing an opportunity to allow God to direct my life in the vocation of His choosing.

*As part of being a short-term missionary, I will need to raise my own support. This is where you can play a significant part through your giving of money, and more importantly, your continuous prayers. I will need a total of \$_____, and I have been diligently raising the initial funds myself. Before I ask others to sacrifice financially, I must be willing to make the first contribution. The trip cost covers air travel abroad, surface travel abroad, work projects, meals, lodging, staging camp, and administration expenses. It is important that you make the check payable to **Parkview Christian Church**, and not to me. Checks should be sent to me for my records, and I will deliver them to **PCC**.*

Thank you for your consideration in this matter of finances. Please consider praying for me on a daily basis, as I strive to fulfill my commitment this summer to seek and save the lost in another part of the world. I know that God works through His people, and that only with His help can any lasting results occur. Pray specifically that God will show me His ultimate will in what I do with my life.

Your Closing,

Your Name

Servant Leadership Missions Trip Application

New York, NY, July 10 - 17, 2010

Name: _____ Age: _____ DOB: _____

Phone: _____ Current Grade: _____ Today's Date: _____

Why do you desire to attend this trip?

What do you expect to gain from this trip?

What are you currently involved in at Parkview? (Check all that apply)

Saturday Student Ministries Relevant (Leader's Name _____)

Serving in _____ Other _____

In how many mission trips have you participated? _____ (If more than zero, please list them.)

What would you identify as your strengths?

What do you see as your weaknesses?

Participant Agreement

I understand that if I am able to participate in this trip that I will be required to attend any and all functions pertaining to the missions trip. I also understand that if I am absent from any of the functions that relate to the missions trip, without prior permission from the Leaders, I may be asked to forfeit my ability to go and also my registration money. If I am absent with permission from a fundraising activity, any monies collected by that activity will not be credited to my account. I further understand that we will be required to bring tools and other supplies with us to the site and that I will be responsible for bringing some of the required items.

By signing below I am promising to attend any and all functions pertaining to the mission's trip, taking care of all costs of the trip that are related to my attendance, and I am also stating that I understand all that is required of me. I also understand that my registration money is non-refundable.

I understand that all raised monies (whether through fund-raisers or support letters) **cannot be refunded to me but will be kept in a general mission's fund**. Any monies raised over and beyond the needed amount cannot be returned to me, nor can they be used for future trips. Also, funds are NOT transferrable.

(Printed name of participant)

(Signed name of participant)

Parental Participant Agreement

I have read through the information and understand that my son/daughter will be attending a missions trip, if able. I am aware of the type of activities that will take place during the week of the missions trip. I understand what is required of my son/daughter in relation to attending any functions that pertain to the trip. I give permission for my son/daughter to be considered for the trip. I furthermore understand that all raised monies and any monies over the needed amount cannot be refunded, they are non-transferrable, nor can they be carried over to the following year.

(Printed name of parent or guardian)

(Signed name of parent or guardian)

Consent for Treatment of a Minor

This form **MUST** be completely filled out and notarized for the participant's application to be processed. Notary Publics are on staff at Parkview, but you must make an appointment with them to have it signed and stamped. Notary Publics are also on staff at your local bank, law office, and courthouse.
Please also include a copy (front and back) of the participant's health insurance card.

To be completed by Parents / Guardians:

I, _____, being the parent or legal guardian of
(Printed name of parent / guardian)

_____, give my consent for emergency medical and surgical
(Printed name of participant)

treatment of this minor in the event that such treatment becomes necessary. I grant my permission for treatment in a licensed hospital by a licensed physician and the physician's assistants and designees, including such hospital personnel as the physician may deem necessary. I understand that hospital personnel will make reasonable attempts to contact me before initiating treatment. I am aware that the practice of medicine is not an exact science and that no guarantees can be made concerning the results of treatment. The minor named in this consent form may receive all treatment provided according to generally accepted standards of medical practice with the following limitations (if none, write "NONE"):

My consent is effective for the following time period: from **July 10 thru July 17, 2010**

(Printed name of parent or guardian)

(Signed name of parent or guardian)

(Date)

To be completed by a Notary Public:

County of: _____ State of: _____ Country of: _____

On this, the _____ day of _____, 20_____, before me, the undersigned Notary Public,
(Date) (Month) (Year)

personally appeared the above named individuals for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

(Notary Public Signature)

(Commission Expiration Date)

General Release and Hold Harmless Agreement

I, _____, desire to participate in various programs, events or activities (hereafter collectively referred to as the "Activities") operated or sponsored by LEAD222. I understand and acknowledge that LEAD222 will not allow me to participate in the Activities without my releasing and holding LEAD222 harmless from any liability arising out of my participation in the Activities. I have investigated the risks involved in my participation in the Activities and fully understand and assume such risks. Specifically, I understand and acknowledge that I may suffer or experience among other things; personal injury or bodily damage, medical disabilities, loss or theft of personal property, imprisonment, abduction, or even death.

I REQUEST THAT LEAD222 ALLOW ME TO PARTICIPATE IN THE ACTIVITIES, AND IN CONSIDERATION THEREOF I AGREE HEREBY TO RELEASE AND FOREVER DISCHARGE LEAD222, ITS OFFICERS AND DIRECTORS, ITS EMPLOYEES, AGENTS, AND PARTIES VOLUNTEERING ON BEHALF OF LEAD222, AS WELL AS THE HOST CHURCHES FOR THIS TRIP FROM ALL ACTIONS, CAUSES OF ACTION, INJURIES, CLAIMS, DAMAGES, COSTS OR EXPENSES OF ANY KIND GROWING OUT OF OR RELATED TO ANY SUCH ACTIVITIES IN WHICH I PARTICIPATE. I UNDERSTAND THAT THIS IS A FULL AND COMPLETE RELEASE OF MY PARTICIPATION IN ANY ACTIVITIES, REGARDLESS OF THE CAUSE THEREOF.

This agreement is binding on my heirs, successors, and personal representatives.

Dated: _____ Print Name & Sign: _____
(Participant)

Dated: _____ Print Name & Sign: _____
(Parent / Guardian)

Medical Treatment Authorization and Power of Attorney

In the event I suffer an injury or condition during my participation in the Activities, including transportation to and from the Activities, which may endanger my life, cause disfigurement, physical impairment, or undue discomfort if medical treatment is delayed and as the result of which I am unable, in the opinion of my leader Adam Ader acting as an agent of Parkview Christian Church (church name) to make an informed decision regarding such treatment, after said leader has made a reasonable effort to call my emergency contacts, I hereby appoint my leader Adam Ader acting as an agent of Parkview Christian Church (church name) to make any and all decisions for me concerning my personal care, medical treatment, hospitalization and health care. This power of attorney shall terminate when, in the opinion of my attending physicians, I am competent to make informed decisions regarding the need for medical treatment.

Dated: _____ Print Name & Sign: _____
(Participant)

Dated: _____ Print Name & Sign: _____
(Parent / Guardian)

Permission to Use Photograph and/or Video

I grant to LEAD222 United, Inc its representatives and employees, the right to take photographs and video of me in connection with Servant Leadership activities. I authorize LEAD222 United, Inc, its assigns and transferees to copyright, use and publish the same in print and/or electronic format for the purpose of publicity, illustration, advertising, and Web content.

Print Name & Sign: _____ Date _____