



# Short Term Missionary Support Request

Thank you for your interest in having Living Water Community Church provide support for your short term mission trip. Please complete this form in its entirety and submit it to the church office. We will contact you with our decision after we have reviewed your request (approximately four (4) weeks). **All fields must be filled out for the application to be considered.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone and Email: \_\_\_\_\_

Where are you going? \_\_\_\_\_

When are you going / length of trip? \_\_\_\_\_

With whom are you going? \_\_\_\_\_

What are your goals for this mission? \_\_\_\_\_

\_\_\_\_\_

Please give a short personal testimony. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What is the trip's overall cost? \_\_\_\_\_ How much are you personally paying? \_\_\_\_\_

How much are you asking from others? \_\_\_\_\_ How much are you asking from Living Water? \_\_\_\_\_

What church do you attend? \_\_\_\_\_

Jesus teaches us in Luke 16:10, "One who is faithful in very little is also faithful in much." With that truth in mind, please answer the following questions.

In what ministries do you serve in your home church? \_\_\_\_\_

Do you regularly & sacrificially contribute financially to your home church? Yes / No

References (please list two references)

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____

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

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<b>For Missions Team Use:</b>	Approved / Disapproved
Date: _____	Amount: _____
Authorized Signature: _____	