## Southern Baptist Conference of the Deaf

## International Mission Committee Mission Team Fund Request Form



Name of Church/Organization:	Address:	City/State/Zip:
Name of person filling out form:	VP Number:	Email Address:
Is this Southern Baptist Volunteer Mission Team? Yes No	Name of Missionary and Organization you will be working with:	
Is this an IMB Project under the Deaf Affinity Group? Yes No	Dates of the Mission Trip:	Missionary Email Address:
This fund request is for:	Total of number of the people on the team:	How many: Deaf Hearing
If this fund request is for a team, list here each person on the team and are they members of a SBC church?		
What is the purpose of the mission trip? (Evangelism, Camp, Education, Construction, Training, VBS)		
\$ Amount requested from the Fund:	To whom shall the check be written out to address where the check is to be mailed to:	
How will the \$ be used?		
Name of Mission Trip Coordinator:	VP Number:	Email Address:
The above information is truthful and correct:	I agree to send a one-page report detailing the mission trip once the mission trip is completed.	I agree to send the pictures of the mission trip for the purpose of the IMC report during the SBCD conference week.
Signed:	Signed:	Signed:
I understand that the IMC (International Mission Committee) will review this fund request and the request may be approved or declined. I understand that if approved, the IMC will award funds up to, but no more than, \$100 per person requesting the fund. I understand that there is a maximum \$500 funded for a team even if they have more than 5 persons on the team. Signed:		
Please mail this form to: For more information, please email Rusty Lower at <b>rustylower@gmail.com</b>		

Rusty Lower, IMC Chair <u>1273 Summer Haven Cir</u> Franklin, TN 37069 For more information, please email Rusty Lower at **rustylower@gmail.com** Please send fund request application more than 2 months prior to the mission trip to give the committee time to review and process the request.