





## 短期服侍報名表及承諾聲明 Application & Commitment Form For Short-Term Mission Trip

#### 個人資料 Personal Information

為方便處理,務必字體端正填寫,資料絕對保密,僅供內部使用。Please fill in this form in BLOCK LETTERS for computer processing. All data will be treated in strict confidence and for internal use only.

		/旅遊證件上的	姓名相符):					
Name printe	ed on your	Passport / ID:						
(中) 名			(英)				性別 sex	
(Chinese)	姓	名	(English)	Surname	Given Name			
住址:								
Address								
聯絡電話:	(住家)_		(辦公室)		(手機)	傳真	:	
Phone			(Office)		(Mobile)	(Fa)	:	
電郵地址:				贈	業:			
Email Addres					Occupation			
出生年日:		年	月	_	姻狀況:未婚			
Date of Birth	(yyyy)	(mm)	(dd)	Ma	arital Status: Sing	le / Married / Div	orced / Wido	w(er)
身份證號碼	馬:		_(影印本) 有刻	效旅遊證件	編號:			(影印本
I.D. No.	(Please a	ttach a copy of yo	ur ID card) Pas	sport / 回鄉記	登 No. (Please attach	n a copy of your pass	port / Mainland T	ravel Permit
				受洗日期	期: paptism: (yyyy)	年	月	目
Name of chu	rch			Date of b	paptism: (yyyy)	(mm)	(dd)	)
學歷程度 E	ducation							
□中學		預科	□大學	□神	學 ( 包括延伸課	程)		
Secondary	/	College	University					
若你太會心	4.循知销价	7的身體哪方面	的健康狀況/病児	歷,並請列	明你對哪些药	物禍敏。		
			ribe any medical c					
*****	*****	******	*****	*****	******	*****	*****	*****
		緊急聯絡	In Case of	Emergei	ncy, please o	contact		
姓名:(中)			(英) _	. <b>L</b> .\				
Name (Chir	-		(Englis	•				
			(辦公室)		(手機)		Į:	
Phone	(Home)		(Office)		(Mobile)	(Fa:	()	
電郵地址:					<b>『條:</b>			
電郵地址: Email Address				 關係: Relationship to you				







(Please use 1-5 to indicate your proficiency, 1 is least fluent, 5 is most fluent)

•		•		•	
廣東話 Cantonese	能講 speak	能聽 listen			
國 語 Mandarin	能講 speak	能讀 read	能寫 write	能聽 listen	
英 語   能講 English   speak		能讀 read	能寫 write	能聽 listen	
其他(請列明) Other; please speci					
<b>恩賜才幹 S</b> p 教導: □聖經	oiritual Gifts □神學	□宣講	□門訓課程	□三福訓練	□其他
Teaching: Bible 事工: 日 兒童	Theology ]青年	Preaching 【 佈道	Discipleship Training  ■ 關顧/探訪	g EE-III Training □聖樂/歌唱	Others; please specify  其他
Ministry: Childre 服侍: B寮 Serving: Medica	□輔導	Evangelism □電腦 Compute	Caring; Visitation ] 社區服務 [ Community Service	Church music/ Singing ] 教授英文	Others; please specify  其他 Others; please specify
輔助: 🗎 烹飪 Auxiliary: Cooking	□ 繪畫設計 g Art/Graphic d	□ 懂樂器 esign Play mus	吕 Sical instrument; please s		□ 其他 Others; please specify
請列出你在教中Please list your m		ent in the church	r		
你曾參與過下 What kind of mini 為差傳禱告 Pray for mission 讀差傳書籍 Reading Mission	istries have you p ]為差傳 o Offering	articipated?	□ 曾	sionary Short-term m	川練班 年期: inistry Training Course □ 曾考慮成為宣教士 Consider to be a missionary
為甚麼你想參) Why do you want			ninistry?		
你認為你可以 In what area do y			rvices?		
在參加此次行來 What are some o					
堂主任 / 傳道 / Signature of Past			(	姓名 <b>Name</b>	)







#### 醫療短宣醫務人員專用 For Midical mission only

Acupuncturist Other \_\_\_\_\_

# PROFESSIONAL INFORMATION: Prof. School Graduated: Degree Awarded:\_\_\_\_\_\_ Year\_\_\_\_\_ Place of Fellowship:\_\_\_\_\_ Type :\_\_\_\_\_\_Year\_\_\_\_\_ Specialty\_\_\_\_\_\_Board Certified? Y N Year\_\_\_\_\_ Specialty\_\_\_\_\_\_ Board Certified? Y N Year\_\_\_\_\_ Status: ☐ Retired - Year: \_\_\_\_\_ ☐ Active - Private Practice? Y N Employed By:\_\_\_\_\_ LICENSES List all current licenses. A copy of each license must be attached State/Country:\_\_\_\_\_ Medical License #:\_\_\_\_\_ State/Country:\_\_\_\_\_ Medical License #:\_\_\_\_\_ **OTHERS**: □ Medical student Year\_\_\_\_ ☐ Student Nurse Year\_\_\_\_ ☐ E.N. ☐ Physiotherapist ☐ Pharmacist ☐ Chinese Medicine Practitioner Π R.N.







### 承諾聲明 Application Commitment

經過在神	面前懇切禱告	音等候,我愿	<b>以</b> 到神帶領我	參與這次短	期服侍行程	。我願意全然
委身於	年	月日	至年_	月	日之	
體驗,參與所	有出發前之	籌備與訓練	, 並遵守團	隊一切的政	策及規則	特此聲明。
簽署: 十八歲以下參加					月	目
家長/監護人姓名	去:		簽	曼:		
and feel that Go to be a member	•	e to participa	ite in this trip.	By signing th	is form, I am	committed from
participate in al set forth.	I the training se	essions and a	abide to the po	olicy and regu	lation of the	team that may
Signed:		on	(yyyy)	(mm)	(dd)	
If participant is	under 18years	of age, pare	nt or legal gua	ırdian signatu	re is also red	quired:
Parent / C	- ⊇uardian'e nam	۵.		Signatur	۵.	