Guidelines for the India Mission Trip

The key to a healthy and successful trip lies in **prayer and preparation**.

1. **Objective:**
   To develop a passion for Christ and compassion for others and to experience and learn firsthand the history, growth and the work of the Mar Thoma Church, in India.

2. **Who are the Participants:**
   College and university age students (age 18 and above) and working young adults. Non Mar Thoma participants will be considered on a case by case basis with the permission of the Diocesan Bishop.

3. **What is the expectation:**
   This trip will be a life changing experience for both the mission team participants and the people being ministered to during the trip. It will help you understand how fortunate you are to have the comforts you experience on a daily basis. Your participation in this trip will enrich you and will be challenging for the body, mind and soul.

4. **Accommodation:**
   The team will be staying at places provided by the leaders in the mission fields we visit. It is expected that we provide a donation for our room and board.

5. **Other Activities:**
   Any available sightseeing and shopping will be permitted only if it coincides with the team’s main purpose, but could be canceled if not deemed convenient for travel, time, or if it hinders the flow of our mission trip.

**Participant Responsibilities**

a. Participants will be required to sign a *Diocesan waiver* in order to participate.

b. Participants will be responsible for purchasing their airfare. The Diocese, upon completion of the trip and submission of the receipts, will reimburse one third of the airfare. Itinerary of the booking should be sent to the Team Leader before the commencement of the journey to receive the reimbursement.

c. Participants should bring your Bible and a notepad or iPhone /laptop.

d. Participants should dress appropriately for a Christian Mission Trip and keep up the Christian team spirit in our words and actions.

e. During the trip duration, all participants are expected to follow the itinerary prepared by the respective Mission field co-coordinator and follow the instructions of the team leader.

f. Upon return, each participant, with the help of the team leader, is expected to raise funds within a stipulated time (3 months) and send the collection to our Diocese to donate to the various mission fields that are visited. (at least 50% of the expenses we claim from the Diocese should be raised.)

g. Participants are responsible for their own health care coverage for the duration of the trip. Please consult your physician and make appropriate decisions regarding immunizations and other medical needs. Please have handy any medications or prescriptions needed.

h. Prior permission is to be taken from the Diocesan Episcopa, if the above norms cannot be complied for sufficient reasons.

**Dear Participant**

*We are pleased that you are participating in the India Mission Trip.* We are happy to have you in this program and look forward to sharing many programs with you. In order to formalize your commitment to this program, we require that you sign two copies of this letter and return one to the Achen (at your local Parish) by 28th February, 2015 and e-mail the other to Mrs Mariamma Abraham at mabraham.abraham@gmail.com or Mr. George Mathai at georgemathaica@gmail.com. Before you sign these letters, however, please read the information and expectations about the program. By signing these letters you are indicating that you understand and accept the information and responsibilities.
Application Form.

Name of Participant: ___________________________________________

Address: _____________________________________________________

Home Phone: ________________  Email:______________  Age:______

Parent/Guardian Contact information:

Name: ___________________________ Email: ________________

Mobile: __________

Other Emergency Contact:

Name: ___________________________ Relationship: __________________

Phone #(s): ____________________________________________________

Current Medical Insurance is required for all participants

Insurance Provider: _________________________ Policy Number: _____________

Physician’s Name: _________________________ Phone #: _________________

Are there any known allergies to food or medications? NO YES: if yes, explain:

________________________________________________________________________

In case of a medical emergency, I authorize my team leader to make decisions to allow me the best possible care.

I commit to the India Mission Trip 2015 and agree that I must participate fully in the entire mission from beginning to end, as well as actively participate in Mission Trip fundraiser. I will not leave my assigned area of ministry or separate myself from my assigned group. I will abstain from any behavior or practice that is not conducive to the values of the Diocese of North America and Europe.
FREE TIME: I will assume full responsibility for activities that I engage in during any and all times of this Trip when I am not involved in formal/planned activities. I also recognize that I am a representative of the Diocese of North America and Europe while on this Trip whether I am conducting planned activities or on free time and my conduct will reflect this representation at all times.

I, ______________________, accept the conditions as outlined above and make a commitment to the Diocese of North America and Europe, my local parish, my Team leader and fellow participants of my time, money and energy to participate in this program.

Signed________________________________________ Date: _____________________

Deadlines:

1. Participants must adhere to the following deadlines, which is 1st May 2015.
   By this time participants must:
   a. Have secured their visa to travel to India.
   b. If the ticket is not being purchased as a group, participants must have purchased tickets by 15th March 2015.
   c. Have completed the Waiver form.
   d. The passport must be valid for at least 6 months beyond the date of your expected departure from India.

* Diocese of North America and Europe: Office #: 516-377-3311
* Mumbai Diocese contact info in India: Office #: 91 (22) 2766 9484

Canada : George Mathai : 416 277 8756
USA : Mariamma Abraham : 215 917 2920

Post Mission Liability Form:

I will assume all responsibility for activities that I engage in during any and all times after the end date of “the India Mission Trip” to Mumbai.

Date for this Trip: 27th July 2015 to 12 August 2015

I ACKNOWLEDGE that I have read and understood this agreement; that I understand that the Diocese of North America and Europe has no responsibility for my actions, return, health or wellbeing after the end date for this Trip; that I am waiving legal rights which I or my heirs, next of kin, executors, administrators and legal representatives may have against the Diocese of North America and Europe; and that I have executed this agreement voluntarily.

SIGNED THIS ________ day of __________________, 20____ at________________,______________________________

SIGNATURE OF PARTICIPANT                     SIGNATURE OF WITNESS (Vicar)