



United Methodist Volunteers In Mission
Southeastern Jurisdiction Office of Coordination
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INT. MISSIONER PROFILE AND RELEASE OF CLAIM

This form is for teams traveling to projects outside the USA. Each team member must complete this form, and a packet of all team members' Missioner Profiles must be sent to the UMVIM, SEJ office at least two weeks before departure.

| | |
|---|---------------------------|
| Team Leader _____ | Departure Date _____ |
| Project Name _____ | Return Date _____ |
| Location & Country _____ | Nickname _____ |
| Legal Name _____ | Work Phone _____ |
| First Middle Last | Home Phone _____ |
| Address _____ | Fax _____ |
| _____ | Date of Birth _____ |
| City State Zip | Sex _____ |
| Email _____ | |
| Occupation _____ | |
| Employer _____ | |
| Conference _____ | Emergency Contact _____ |
| District _____ | Relationship to you _____ |
| Local Church _____ | Emer. Contact Ph# _____ |

The following guidelines are recommended by the UMVIM, SEJ Board of Directors for all missioners, both team members and individual volunteers. Volunteers in mission are not tourists; they go at the invitation of another church as guests. It is extremely important to be willing to adjust to the expectations of the host church. Therefore, in consideration of the opportunity to participate in the project described above as a volunteer, and in consideration of other obligations incurred by the mission organization, please review the following agreement and sign below:

- I agree to share my faith in an appropriate Christian manner.
- I agree to cooperate at all times with the team leader concerning our work and life together including daily assignments, food, lodging, and transport and to stay with the team from beginning to end.
- I agree to abstain from offensive habits while on the mission. **(The use of alcohol and tobacco is unacceptable for Christians in many countries)**
- Further, I hereby release and discharge the mission organizations which assisted in these arrangements, their agents, employees, and officers, from all claims, demands, actions, judgments, and executions which I ever had, or now have, or may have, or which my heirs, executors, administrators, or assigns may have or claim to have, against the mission organizations, their agents, employees, and officers, and their successors or assigns for all personal injuries to property, real or personal, caused by, or arising out of, the above described mission service. I intend to be legally bound by this statement.
- I hereby acknowledge that by engaging in this mission, I am subjecting myself to certain risks voluntarily, including and in addition to those risks which I normally face in my personal and business life, including but not limited to such things as health hazards due to poor food and water, diseases, pests, and poor sanitation; potential danger from lack of control over local population; potential injury while working; and inadequate medical facilities, etc.
- I agree to abide by the UMVIM, SEJ Safe Sanctuary Policy, viewable at: <http://www.umvim.org/newsite/umvim/web-content/Pages/about/safesanctuary.html>

The validity, construction and interpretation of this **MISSIONER PROFILE AND RELEASE OF CLAIM** form shall be governed by and construed in accordance with the domestic laws of the state of Georgia, in which the UMVIM SEJ office and our insurer, the CMA Agency, Inc. are located.

In witness whereof, I have executed this agreement and this release at _____ Date _____
(city & state)

Signature

IMPORTANT NOTE: This form alone is **not** sufficient to institute insurance coverage for you. If you desire insurance for your mission, it **MUST** be accompanied by a completed copy of the *Team Roster* form (**one copy per team**), with a check for the registration fee & the appropriate amount for the desired coverage.