

MEXICAN MEDICAL MINISTRIES 2019 CARAVAN APPLICATION

Please mail in this form with application fee as soon as possible!
\$50.00 for a weekend group / \$125.00 for week or more
 This amount is not a deposit and is non-refundable. When completed please return to:
 Mexican Medical Ministries
 7850 Lester Ave
 Lemon Grove, CA 91945

Church or Organization name: _____

Church or Organization's address: _____

City: _____ State/Province: _____ Zip +4: _____

Church or Organization's Phone number: _____

Name of the Pastor of the church: _____

Denomination/Affiliation of Church or Organization _____

E-mail: _____ Fax: _____

Group leader of the mission trip: _____

Group leader's address: _____

City: _____ State: _____ Zip +4: _____

Phone number: Work _____ ext.: _____ Cell: _____

Home _____ E-mail _____

Has this leader accompanied a caravan with Mexican Medical before? Yes ___ No ___

If no, has this leader had a similar experience? Yes ___ No ___

If yes, when and where did this leader go? _____

- Desired Caravan dates: 1st choice: _____ 2nd choice: _____
- Desired Site: (Please check the site you would like to take your caravan to)

<input type="checkbox"/> Cabo San Lucas	<input type="checkbox"/> La Esperanza	<input type="checkbox"/> Loreto	<input type="checkbox"/> Mobile Team	<input type="checkbox"/> Other
<input type="checkbox"/> San Vicente	<input type="checkbox"/> Tecate	<input type="checkbox"/> Tijuana		

- Approximate number: Total: ___ (Type of group: H.S. ___; College ___; Adult ___)

PLEASE COMPLETE THE BACK SIDE OF THE APPLICATION

- Number of people who speak Spanish fluently _____
- Has your group come with Mexican Medical before? Yes ___ No ___
 If so, what year(s) and what site(s) did the group go to? _____

- If this is your group's first mission trip with Mexican Medical how did your group come in contact with us?
 ___ Recommended by a friend/acquaintance. Who recommended? _____
 ___ Received information at a conference / seminar / Mission Fest / etc.
 At what conference or meeting did you receive the information?

 ___ We received the information by: _____

- What specific goals do you wish to accomplish during your time in Mexico? _____

- What are your plans to prepare your caravan team for the mission trip? _____

- **Caravan Leader's Manual:** In what form would you like to receive the manual?
 ___ Hard Copy; ___ C.D.; ___ via e-mail attachment