



reachglobal

crisis response

Team Leader Information

ReachGlobal Crisis Response, the crisis response ministry of EFCA

Revised March 2017

We exist to Develop, Empower, and Release the Body of Christ to show His love in times of crisis...to multiply Transformational churches among all people.

Mark Lewis, Director
ReachGlobal Crisis Response
19380 N. 10th Street
Covington, LA 70433

PACKING LISTS (Page 2 of 2)

PERSONAL PACKING LIST

- Bible
- A flexible and servant-like heart and attitude!
- Sleeping bag/linens
- Pillow
- Flashlight
- Soap
- Shampoo/conditioner
- Deodorant
- Toothbrush/toothpaste
- Towel
- Insect repellent
- Sunscreen
- Handi wipes

CLOTHES:

- Work clothes
- Long-sleeved shirts for November-April
- Long pants and/or cargo shorts
- Casual clothes for evening times and traveling
- Sweater, sweatshirt, or light jacket in season
- Modest sleeping clothes
- Raingear
- Hat
- Versatile walking shoes
- Work shoes (Tennis Shoes are acceptable; steel toes are not required, but if you have them, bring them!)
- Flip-flops for showers or evenings

Optional:

- Earplugs
- Laptop (WI-FI not available in all locations)
- Alarm clock
- Gift cards to donate to the ministry from Lowes, Home Depot, Wal-Mart etc.

IMPORTANT ITEMS TO CONSIDER

REST

An overly tired worker may not be able to minister effectively when opportunities arise. It is important that everyone work at a reasonable pace throughout the day and stay hydrated.

RISK

The work sites will by nature have risks associated with them. Your safety is not guaranteed. We ask that each team member read, sign and have notarized the EFCA Policy Agreement, Permission, and Release of Liability for Adults or Minors. The waiver sheets must be completed, notarized and submitted to the Pre-field Volunteer Coordinator **at least three weeks** before you leave for this trip. Anyone under the age of 18 must get a parent or guardian to sign the waiver. Also, while at some work sites, wearing long pants are suggested, so plan ahead and include a pair of long pants in your suitcase. Safety goggles are also recommended. **A Tetanus immunization within the last 10 years is required**, but documentation is not required. Confirm with each volunteer that their Tetanus shot is current.

MAILING ADDRESS FOR FORMS AND FEE PAYMENTS

(Please include payment forms on pg 30 & 31 with checks)

ReachGlobal Crisis Response
19380 N. 10th Street
Covington, LA 70433

QUESTIONS

If you have any questions or concerns, please don't hesitate to call us at 985.888.1060 or email us at www.respond@efca.org.

TEAM MEMBER SKILL ASSESSMENT

Please complete and e-mail to respond@efca.org 4 weeks prior to arrival.

- Please write a number 1 through 6, as each skill applies to each team member.
- If you have no experience at all, please leave that box blank unless you are willing to learn.
- If you are licensed in a given area (e.g., plumbing, electrical), please write that next to your name.

1 - Willing to learn 2 - Have helped before 3 - Work at frequently 4 - Experienced Do-It yourselfer
5 - Make a living at 6 - Licensed

| Organization/ Church Name | Week Coming to Serve | Team Leader | Please list team members | Age Range | Pastor, elder, ministry leadership (Please specify) | General/Versatile laborer | General Contractor | General Carpentry | Finish Carpentry | Drywall Hanger | Drywall Finisher | Framing | Painting | Flooring | Siding | Windows | Roofing | Electrician | Plumbing | Heating/AC | Tile Setting | Masonry | Counseling | Prayer | Visitation | Mechanic | Other (please specify) |
|------------------------------|----------------------|-------------|--------------------------|--|---|---------------------------|--------------------|-------------------|------------------|----------------|------------------|---------|----------|----------|--------|---------|---------|-------------|----------|------------|--------------|---------|------------|--------|------------|----------|------------------------|
| | | | | 1= under 14 2=14-15 3=16-17 4=18-39 5=40-59 6=60 plus | | | | | | | | | | | | | | | | | | | | | | | |
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|------------------------------|---|--|---------------------------|--------------------|-------------------|------------------|----------------|------------------|---------|----------|----------|--------|---------|---------|-------------|----------|------------|--------------|---------|------------|--------|------------|----------|------------------------|
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| 15. | | | | | | | | | | | | | | | | | | | | | | | | |

**reachglobal**

Develop. Empower. Release.

Policy Agreement, Permission, and Release of Liability

- Please complete each of the four gray blanks in the text with the appropriate information.
- Print 4 completed, two-sided copies of the form, and have each copy notarized (required).
- If on a team, please give 3 copies to your team leader 30 days before departure to the field. The 4th copy is for your own record. **Team leader:** For each team member, please send at least 3 weeks prior to departure 1 notarized copy of this form to the appropriate address below. Give 1 copy to your church leaders, and bring 1 copy with you to the field.
- If going as an individual, please send at least 3 weeks prior to departure 1 notarized copy of this form to the appropriate address below. Give 1 copy to your sending church, bring 1 copy to the field to give to the ReachGlobal staff or appointed host, and 1 copy is for your own records.

I do hereby acknowledge that I, _____ (your name), consent to participate on a short-term mission in _____ (location) during these dates _____ with the ReachGlobal team serving there, including but not limited to, foreign and domestic travel, ministry training, construction, outreach ministry, sightseeing, sports, recreation, and debriefing.

I agree to abide by any policies and procedures as are deemed necessary, for my management and safety, by the short-term mission leaders and/or supervisory personnel of and/or ReachGlobal. I realize that infraction of rules, misconduct, or culturally inappropriate behavior will result in my dismissal from the short-term mission. In the event that I am dismissed, I agree to return home immediately, entirely at my own expense. I understand that there will be no refund of the short-term mission package cost.

I, of my own free will and under no duress whatsoever, do absolutely and unconditionally release EFCA, ReachGlobal, _____ (my church), their agents, employees, and volunteers from any liability whatsoever for any damage, loss, accident, hardship, injury, sickness, disease, or death that I may sustain for any reason during my travel and service with ReachGlobal, or from any other cause, event or occurrence, including, but not limited to, natural disasters, animal attack, terrorist acts, war, civil disturbances, and alleged negligence. I acknowledge and accept that, in any travel and on any construction site, there is inherent risk. I hereby fully and voluntarily accept such risk, and serve entirely at my own risk.

I fully understand and agree that ReachGlobal is opposed to the payment of ransom for the return of its members or their families who have been kidnapped for financial reasons, taken hostage for political reasons, or seized for any other purpose or reason. I agree to support the Crisis Management Team (CMT) appointed by ReachGlobal, should such an event occur, and further agree not to interfere with or bypass the crisis management process established by said CMT.

Any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text is available at www.HisPeace.org). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

I understand that ReachGlobal does not accept responsibility for any lost, damaged, or stolen personal property.

Furthermore, ReachGlobal and its appointed short-term mission leaders, and/or personnel have my permission to authorize medical treatment, including administration of medication, anesthesia, emergency surgery, or hospitalization for me as is deemed necessary by the aforementioned and the attending physician. I agree to assume complete financial responsibility for all medical bills incurred by me, and agree to reimburse ReachGlobal fully for medical payment made on my behalf. My major medical insurance policy covers me while I am abroad, or if not, I will purchase short-term medical insurance that will cover me on this short-term mission.

I agree to assume total financial responsibility for me to travel home immediately if it is necessary to dismiss me from the short-term mission for either disciplinary or medical reasons.

I do willingly affix my signature in full and unreserved agreement with all of the aforementioned statements and agreements.

X

Legal signature of team member_____
Date

Subscribed and sworn to before me on this _____ day of _____ 20____

Signature and seal of notary public_____
My commission expires_____
Seal/Stamp

Submit one notarized copy of this release and emergency information form to the correct address below for each person serving on:

- **A ReachGlobal Crisis Response Opportunity:** ReachGlobal Crisis Response, 19380 N. 10th Street, Covington, LA 70433
- **All Other Short-term Mission Opportunities:** ReachGlobal, 901 East 78th Street, Minneapolis, MN 55420-1300, Attn: CONNECT

Emergency contacts for:

Address:

City: State: Zip:

Home phone: Work phone: Cell phone:

Email:

Health Insurance Company that will cover you during your Short-term mission experience:

Company name:

Policy: Account:

Primary emergency contact:

Relationship to team member/leader:

Address:

City: State: Zip:

Home phone: Work phone: Cell phone:

Work hours: Email:

Alternate emergency contact:

Relationship to team member/leader:

Address:

City: State: Zip:

Home phone: Work phone: Cell phone:

Work hours: Email:

Pastoral contact:

Relationship to team member/leader:

Address:

City: State: Zip:

Home phone: Work phone: Cell phone:

Work hours: Email:

If you need short-term medical insurance we recommend:

Gallagher Charitable International Insurance Services

1-803-758-1400

<http://www.aaintl.com/>

Or Insurance Services of America

1-800-647-4589

<http://www.missionaryhealth.net/shortterm/>



901 East 78th Street, Minneapolis, MN 55420-1300
 (800) 745-2202 • www.efca.org

Photo Release

I hereby grant to the Evangelical Free Church of America (EFCA) and to its employees, agents and assigns the right to photograph me or my dependent and use the photo and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet.

Model's Signature:

Model's Printed Name:

Address:

Date:

For minor children:

I certify that I am a custodial parent and have the aforementioned rights to assign.

Signature of Parent or Guardian:

Print Name of Parent or Guardian:

Address:

Date:
