

Raintree Christian Church
Local Missions Ministry Experience Request

Date of Submission: _____

Provide a brief summary of your Local Missions Ministry Experience (what you intend to do):

Identify specific organization/person(s) benefitting from this Local Missions Ministry Experience:

Describe specific actions, steps and or details related to this Local Missions Ministry Experience, including specific dates if possible:

Financial support Requested: \$ _____ *

Financial support provided by participants: \$ _____

Total financial support required: \$ _____

(* Please provide receipts for Church expenditures to Al Roberts or Toza Nelson)

(If additional people are needed, please note any requirements in the Raintree Participants section at the bottom of this form.)

Describe the plans for follow-up and/or future engagement after the ministry experience is complete:

Raintree Participants:

Ministry Experience Leader(s) and Contact information: _____

Other Raintree Participants(ideally at least 4 Raintree members will be engaged): _____

This completed form can be delivered to the church office or ideally emailed to alwin.roberts@gmail.com

Raintree Christian Church
Local Missions Ministry Project Experience

Please complete at the conclusion of your Local Missions Ministry Project

Describe what occurred during this Local Mission Ministry Experience:

Describe the ways you/or the group saw God move during this Local Mission Ministry Experience:

Describe how you/or the group are different as a result of your Local Mission Ministry Experience:

Describe how you will continue to engage those served in this Local Mission Ministry Experience:

Please add any additional information about your Experience:

This completed form can be delivered to the church office or ideally emailed to alwin.roberts@gmail.com. Any pictures or video of your Experience would be greatly appreciated