

APPLICATION FOR TEDDY EVANS MISSION FUND

For current members in good standing of BHBA Churches

Name: _____ Date of Birth: _____ Application Date: _____

Address: _____ Phone: _____

City: _____ Zip: _____

Member of what Church: _____ Email: _____

Location & Date of Mission: _____

Description of Mission Project: _____

Is your project sponsored by a Southern Baptist Church or Agency? Circle One: Yes or No

Please identify: _____

Your responsible amount for this Mission Trip: \$ _____

1st Trip Maximum \$500 Thereafter Maximum \$250 Amount requested: \$ _____

*Amount granted will be determined by the Missions Development Council on an individual/group application basis.

Date grant needs to be in hand: _____

Remarks: _____

Would you be willing to share your testimony about this trip at a BHBA Event or Church? Circle One: Yes or No

What responsibilities or activities do you have in your church? _____

Personal References:

1. Name: _____
Address: _____
Phone number: _____

2. Name: _____
Address: _____
Phone Number: _____

BHBA Church Approval Date: _____

Signature of Church Pastor or Church Clerk

BHBA approval Date: _____

Signature of Missions Development Council Director or D.O.M. upon Missions Development Council Group Approval

Amount Granted: _____

updated 1-3-19

Leaders of BHBA church sponsored trips are asked to gather applications and send in as an entire group when possible.