



**Los Angeles, California**  
**Mission Trip**  
*June 1st- 6th 2025*  
**Application**

Please print the following information very clearly. It is very important that you write your child's name EXACTLY as it is recorded in his/her passport or photo ID.

Student's last name: \_\_\_\_\_

Student's first name: \_\_\_\_\_

Student's middle name: \_\_\_\_\_

Student's birth date: \_\_\_\_\_

Grade level (2024-2025): \_\_\_\_\_

Student's cell phone number: \_\_\_\_\_

Home phone number: \_\_\_\_\_

Father's name: \_\_\_\_\_

Father's cell number: \_\_\_\_\_

Father email address: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Mother's cell number: \_\_\_\_\_

Mother email address: \_\_\_\_\_



Dietary Restrictions:

Please list ANY allergies or medical conditions:

Does the student carry an epipen and/or inhaler on him or her at all times?

YES NO

Please list any medications that the student takes regularly or specific medications for specific reasons:

Please list the student's travel experience (if any):

Has the student ever been away from home (without a parent's presence) for at least one week?

YES NO

List 3 ESJ teachers from whom we could obtain a recommendation.

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Name of church if you attend one regularly

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Do you attend a youth group or other faith based group?

Yes No

If yes, please list your youth group or other faith based group experience(s).

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Have you ever been on a mission trip? Yes No

If yes, please explain your mission trip experience(s).

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Why do you want to go on the ESJ Mission Trip?

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| <p>I am aware that my participation in this program is contingent upon acceptance into the program according to the established selection procedure.</p> <p>_____</p> <p>Student Signature</p> | <p>I am aware of, and approve of, my son/daughter/ward's decision to apply for participation in the Los Angeles mission service trip. .</p> <p>_____</p> <p>Parent Signature</p> |
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## Los Angeles Mission Service Trip- Dolores Mission Church

*June 1-6th 2024*

### Family Commitment

*Please return this form with your deposit!*

I agree to permit my child \_\_\_\_\_ to participate in the ESJ *Los Angeles Mission Trip* and to travel to California from **June 1-6th 2024**. I have read and understand the outlined payment schedule for the ESJ *Los Angeles Mission Trip*. I understand that after the program application deadline of **October 20th 2024**, our **\$750** deposit will *not* be reimbursed, unless my child is not selected for the program, then this deposit will be reimbursed in full.

\_\_\_\_\_  
Parent/Guardian Printed name Dated

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Printed name Dated

\_\_\_\_\_  
Parent/Guardian Signature



## Payment Schedule

The total cost for the Los Angeles Mission Trip will not exceed \$2000. We are currently pricing flights and other expenses and will communicate the exact cost as soon as we are able to do so.

Application Deadline and \$750 deposit due October 20th, 2024.

Second payment \$800 (last day to drop out and receive refund) due December 2, 2024..

Final payment due (amount TBD - not to exceed \$450) March 21, 2025.