

# Rick Bonfim Ministries

## CUBA TRIP APPLICATION APRIL 2020

P.O. Box 5188 Athens, GA 30604

[www.latterain.com](http://www.latterain.com)

706-353-1546

Dear Applicant,

We welcome you aboard the RBM Cuba trip. We look forward to the opportunity of partnering with you to join in God's glorious work in Cuba. In order to ensure proper processing of your file we ask that you carefully follow these instructions.

**Return the following items to us via mail at:**

Rick Bonfim Ministries  
PO Box 5188  
Athens, GA 30604

- 1) **Application Form completed in full with photo attached**
- 2) **Financial Agreement form, signed and dated**
- 3) **Travel Disclaimer form, signed and dated**
- 4) **Cuba Visa Information form completed in FULL**
- 5) **Release form, signed and NOTARIZED**
- 6) **A photocopy of your passport**
- 7) **Your \$200 deposit to hold your place on the trip**

**Don't wait! Send it now and secure your spot on the team. Once we have received your forms, we will send you fundraising letters and envelopes so that you may begin fundraising.**

**If you have any questions concerning your trip or the information enclosed in this packet, please do not hesitate to call us at the RBM office at 706-353-1546 or contact Matthew Fallick at [rbmmatthew@latterain.com](mailto:rbmmatthew@latterain.com). May God bless you richly in this exciting endeavor.**

In His service,



**Rick Bonfim**

[rbm@latterain.com](mailto:rbm@latterain.com)

706-353-1546

# Rick Bonfim Ministries

## Cuba Mission Trip Check List

### I. Application Process

- 1) Completed **Trip Application Form** in FULL and attached color photo of yourself.
- 2) **\$200 application donation** – (non- refundable - will be applied to your total trip cost).
- 3) **Notarized Release Form** --This form must be signed and stamped by a Notary Public.
- 4) **Signed Financial Agreement Form.**
- 5) **Signed Travel Disclaimer Form**

### II. Fundraising Process

If you have need of fundraising materials we will send you fundraising letters and envelopes so that you may begin fundraising for your trip **upon your request.** Call us if you need a fundraising packet.

### III. Financial Timeline

- 1) Ticket money (non-refundable ticket) – generally due **3 months prior to departure date.**
  - 2) The remainder of the trip cost – generally due **2 months prior to departure date.**
- \*This gives a general idea of timing, but specific payment dates will vary for each trip.*

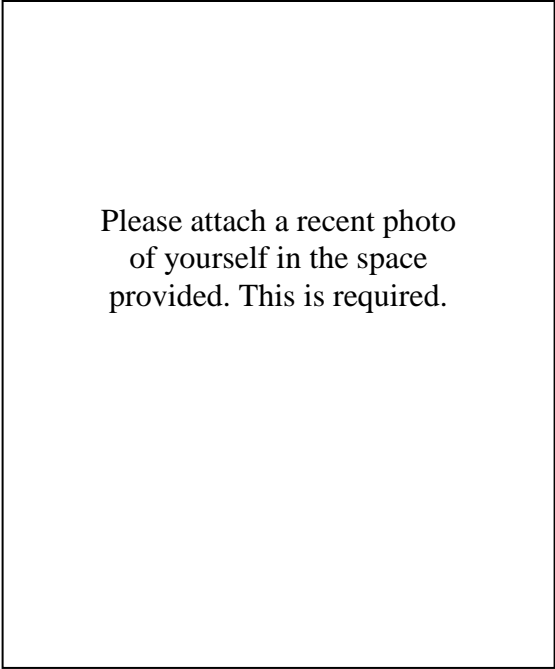
### IV. Passport

If you do not have a passport or your current passport will **expire** within 6 months of the date of the trip, you will need to apply or renew your passport. (At your local U.S. Post Office or at [www.travel.state.gov/passport](http://www.travel.state.gov/passport)). Do not delay on this as it can take up to 8 weeks for your new passport to be processed and sent to you.

### V. Cuba Trip Information Document

It is very important for you to read carefully our **Trip Information Document**, which contains many details pertaining to the mission trip, activities, schedule, money to bring, luggage, guidelines for clothing and packing, and instructions for the day of departure.

**If you have any questions** concerning your trip please do not hesitate to **call the office of RBM at 706-353-1546 or contact Matthew Fallick at [rmmatthew@latterain.com](mailto:rmmatthew@latterain.com).**



Please attach a recent photo of yourself in the space provided. This is required.

*Rick Bonfim*

*Ministries*

***Cuba Trip Application Form  
APRIL 2020***

***PLEASE PRINT LEGIBLY IN INK OR TYPE.  
COUPLES, PLEASE FILL OUT SEPARATE FORMS***

**Section I: Contact Information**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_ Preferred Name (Nickname): \_\_\_\_\_  
Current Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

**Section II: Personal Information**

Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_ Age: \_\_\_\_\_  
Occupation: \_\_\_\_\_ Highest Level of Education Completed: \_\_\_\_\_  
Special Skills/Talents: \_\_\_\_\_  
Marital Status:  Never Married  Married  Separated  Divorced  Other: \_\_\_\_\_  
If married, what is your spouse's name: \_\_\_\_\_ Is he/she a Christian?  Yes  No

### Section III: Emergency Contact

Full Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Section IV: Church Information

Name of Your Home Church: \_\_\_\_\_  
Denomination: \_\_\_\_\_ Pastor's Name: \_\_\_\_\_  
Church Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Church Phone: \_\_\_\_\_

### Section V: Previous Missions Experience

Have you ever been on a mission trip with Rick Bonfim Ministries before?  Yes  No  
If yes, on what dates? 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_  
Have you been on any other mission trip (one unaffiliated with RBM)?  Yes  No  
If yes, where and when? 1) \_\_\_\_\_ 2) \_\_\_\_\_  
What was the nature of your missions work there?: \_\_\_\_\_  
\_\_\_\_\_

### Section VI: Leadership Information

Briefly describe a few leadership responsibilities you have had with your school, work, church, or other Christian groups.

<i>Leadership Role/Title</i>	<i>Brief Description of Responsibilities</i>
1) _____	_____
2) _____	_____
3) _____	_____

### Section VII: Passport Information

Your Name (as it appears on your passport): \_\_\_\_\_  
Issuing Country: \_\_\_\_\_  
Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**NOTE: If you do not have a valid passport (or if your passport expires less than six months from the end of your trip), you must apply for a new passport immediately. The typical wait time for receiving a new passport is 6 to 8 weeks. You may expedite the process by paying a \$60 fee (ask about this at any US Post Office that issues passports). There are instructions on applying for a passport included in this application packet.**

### Section VIII: Medical Information

Are you currently taking any prescription medications?:  Yes  No If so, please indicate which ones, how often, and at what dosage: \_\_\_\_\_

Please indicate any current medical conditions, allergies, or disabilities: \_\_\_\_\_

Please check whether you have or have had the following (indicate frequency and dates on the line):

- |  |   |
|--|---|
| <input type="checkbox"/> AIDS or HIV+ _____        | <input type="checkbox"/> Hypoglycemia _____             |
| <input type="checkbox"/> Anemia _____              | <input type="checkbox"/> Incapacitating Headaches _____ |
| <input type="checkbox"/> Anorexia Nervosa _____    | <input type="checkbox"/> Insomnia _____                 |
| <input type="checkbox"/> Asthma _____              | <input type="checkbox"/> Leukemia _____                 |
| <input type="checkbox"/> Bulimia _____             | <input type="checkbox"/> Bipolar Disorder _____         |
| <input type="checkbox"/> Cancer _____              | <input type="checkbox"/> Motion Sickness _____          |
| <input type="checkbox"/> Depression _____          | <input type="checkbox"/> Nervous Breakdown _____        |
| <input type="checkbox"/> Diabetes _____            | <input type="checkbox"/> Professional Counseling _____  |
| <input type="checkbox"/> Disturbed Sleep _____     | <input type="checkbox"/> For What? _____                |
| <input type="checkbox"/> Drug Use/Abuse _____      | <input type="checkbox"/> Psychosis _____                |
| <input type="checkbox"/> Epilepsy _____            | <input type="checkbox"/> Rheumatic Fever _____          |
| <input type="checkbox"/> Fainting Spells _____     | <input type="checkbox"/> Stomach Ulcers _____           |
| <input type="checkbox"/> Hepatitis _____           | <input type="checkbox"/> Thyroid Trouble _____          |
| <input type="checkbox"/> High Blood Pressure _____ | <input type="checkbox"/> Tuberculosis _____             |
| <input type="checkbox"/> History of Abuse _____    | <input type="checkbox"/> Other _____:                   |

What gender were you assigned at birth (on your original birth certificate)? Male\_\_\_\_Female\_\_\_\_

Which best describes your gender now? Male\_\_\_\_Female\_\_\_\_Other\_\_\_\_\_

Are you actively living in your day to day life any of the following:

Gay\_\_\_\_ Lesbian\_\_\_\_ Transgender\_\_\_\_ Other (explain)\_\_\_\_\_

What is your level of physical fitness?:  Very In Shape  Moderately In Shape  Easily Fatigued

Comments: \_\_\_\_\_

Please check if you are physically able to endure:  Rigorous Outdoor Activity (i.e. work projects)  High Altitudes  High Temperatures  Low Temperatures.

If you answered “No” to any of these, please explain: \_\_\_\_\_

Do you have any special dietary needs for us to consider when choosing the trip menu?:  Yes  No

If so, what are those needs: \_\_\_\_\_

For Women Only: Are you currently pregnant?  Yes  No If so, when is your due date? \_\_\_\_\_

NOTE: If you become pregnant before you are scheduled to go on a certain mission trip, please contact our office so that we can arrange to provide appropriate care for you.

### **Section IX:**

What do you expect to gain from this missions experience? \_\_\_\_\_

---

---

---

What do you expect to contribute to this missions team and the overall missions experience?: \_\_\_\_\_

---

---

### **Section X: Spiritual Life**

In the space provided, please tell us a little about yourself, your faith, and how this mission trip can be helpful to your spiritual growth and well-being: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

In your opinion, what are your current personal spiritual, emotional, mental, etc. needs? \_\_\_\_\_

---

---

---

---

---

**Section XI: Parental Signature**

If you are under 18 years of age, your parent or legal guardian must also sign and date this form. In doing so, he/she is indicating full understanding of all terms and policies and giving parental permission for your participation in this RBM mission trip.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# *Rick Bonfim Ministries*

## Visa Application Information Form

Please provide the following information, which will be used by the office of RBM to apply for your Cuban visa. This **MUST** be completed in full. Please write legibly:

Name on Passport: \_\_\_\_\_

Number on Passport: \_\_\_\_\_

Issuing Country: \_\_\_\_\_

Passport date of issue: \_\_\_\_\_

Passport date of expiration: \_\_\_\_\_

Place of Birth (city and state): \_\_\_\_\_

Country of Birth (Nationality): \_\_\_\_\_

Citizen of which country: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Occupation (even if student): \_\_\_\_\_

Name/Address of school or business: \_\_\_\_\_

\_\_\_\_\_

Permanent residential address: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_

Marital status: Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

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

Mother's maiden last name: \_\_\_\_\_

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



*Rick Bonfim Ministries*  
**Financial Guidelines &  
Financial Agreement Form**

Rick Bonfim Ministries, Inc. is a proud member of the ECFA (Evangelical Council for Financial Accountability). In order to honor our commitment to financial integrity, we adhere to the following guidelines:

- 1) We will track all funds given towards the cost of your trip. A budget line is dedicated for each team member, so that we can accurately account for the all funds. If you have a question about your trip status, our office will have that information available.
- 2) All donors must send checks directly to RBM (with checks payable to Rick Bonfim Ministries).
- 3) All financial contributions are tax-deductible. Tax-deductible contributions are defined as anything given without receipt of goods or services.
- 4) All financial contributions are used to meet the financial costs of each trip participant (airfare, lodging, meals, office expense, etc.). If you raise more than the trip cost, **all your extra money will go toward your trip offering. All trip offering money is used to give to the churches in Cuba.**
- 5) **We are unable to refund contributions given towards a trip after transportation and hotel contracts are finalized, which is typically 6 months prior to the trip departure date. If money is returned for any reason, those funds are not eligible for tax deduction.**
- 6) **There is a \$200 penalty that must be paid along with the remaining balance of a trip if the balance of the trip is not paid on or before the given deadlines.**
- 7) **Plane tickets cannot be purchased until the initial cost is covered. If the first deadline for funds is missed, you will you to cover a \$200 penalty for office expense incurred. Missing the deadline could result in higher ticket costs.**
- 8) **ALL TICKETS ARE NON-REFUNDABLE AND NON-TRANSFERRABLE TO OTHER PEOPLE (DELTA AIRLINES POLICY).**
- 9) **AFTER A TICKET IS ISSUED, ANY NECESSARY CHANGES TO THE TICKET DETAILS, INCLUDING NAME AND DATE CHANGES, IS SUBJECT TO A \$150 FEE, PLUS ANY CHANGE IS AIRFARE.**
- 10) **Rick Bonfim Ministries cannot be responsible for any personal items damaged, lost, or stolen while on your mission trip.**

11) If you have any questions about any of the aforementioned Financial Guidelines, please give us a call at 706-353-1546, or you may email us at [rbm@latterain.com](mailto:rbm@latterain.com).

I have read the Financial Guidelines above. I understand them clearly and agree to them all.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Printed): \_\_\_\_\_

*Please sign and date this form. Make a copy for your records and then return it to:  
Rick Bonfim Ministries  
P.O. Box 5188  
Athens, GA 30604*

# Rick Bonfim Ministries

## Payment Options

Dear Applicant,

We are delighted that you are joining us on one of our mission trips. In covering the cost of your trip, you have the following two options:

- 1) **You may raise all (or part) of your funds through our proven fundraising method.** This is the most common way participants choose to pay for their mission trip. We provide you with all necessary fundraising materials (fundraising letters and contribution envelopes) and assist you through the fundraising process step-by-step. For more information, please contact our office at 706-353-1546.
- 2) You may donate to full amount yourself.

We accept payment in the form of:

- i. Checks – **Make checks payable to Rick Bonfim Ministries.** Note in the “for” line that the funds are towards your mission trip expenses.
- ii. Credit Cards – We accept the following major credit cards: **MasterCard, Visa, American Express, and Discover.** Please be aware that **there is a 3% processing fee for all credit card transactions** through our administrative offices.
- iii. Paypal – Our Paypal email address is [rbmrecurring@latterain.com](mailto:rbmrecurring@latterain.com). **Be sure to make a note in the provided space to indicate the purpose of your donation.** Paypal deducts a nominal fee from all donations given through this service. The amount deducted by Paypal **WILL NOT** be applied towards your trip.

Please contact our offices immediately (706-353-1546) so that we can discuss these options with you and help facilitate your trip’s financial preparations.

Sincerely,



**Rick Bonfim**

Rick Bonfim Ministries, Inc.

[rbm@latterain.com](mailto:rbm@latterain.com)

706-353-1546

# Rick Bonfim Ministries

## Release Form -- MUST be notarized and returned to the office of RBM.

KNOW ALL MEN BY THESE PRESENTS:

THAT, "the undersigned," has released and forever discharged, and by these Presents does not for himself/herself, his/her heirs, representatives and assigns, remise, release and forever discharge the said RICK BONFIM MINISTRIES, INC., and its successors and assigns, of and from all manner of actions, cause of actions, suits and demands whatsoever in law or in equity, which against the said RICK BONFIM MINISTRIES, INC., its successors and assigns, he/she ever had, now has or which his/her heirs, representatives and assigns hereafter can, shall, or may have for any reason.

The undersigned hereby agrees to hold the said RICK BONFIM MINISTRIES, INC., its successors and assigns, harmless from any responsibility or liability for sickness, accident, disease, personal harm, mental harm, any form of abuse, or death incurred while traveling within the United States or to or from or within any foreign country while on the business of the said RICK BONFIM MINISTRIES, INC., its successors or assigns, or any other of those autonomous, independent entities which are non-profit corporations, companies, trusts, or unincorporated associations or movements known broadly and internationally as Rick Bonfim Ministries, whether or not such entities are organized or operating within or outside of the United States of America.

**Valid for the period of time beginning \_\_\_\_\_ (date) until \_\_\_\_\_ (date), related to the Cuba Mission Trip with Rick Bonfim Ministries, Inc.**

IN WITNESS WHEREOF, the undersigned has hereunto set his/her hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, in the year of \_\_\_\_\_.

Signed, sealed and delivered in the presence of:

\_\_\_\_\_  
(Print Name of Notary Here)

A Notary Public in the State of \_\_\_\_\_, in \_\_\_\_\_ County.

\_\_\_\_\_  
Signature of Notary

My commission expires \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or guardian  
if applicant is under 18 years old

# TRAVEL DISCLAIMER AGREEMENT

*Rick Bonfim Ministries*

Until recent years it was very difficult for Americans to travel to Cuba. Restrictions have eased and the U.S. Treasury Department allows sponsored groups on a religious visa to enter under a General License 515.566(a). Previous trips we had to travel by charter flights whose schedules were not released until close to our trip. Now we fly on American commercial flights between the US and Cuba.

- a) **DO NOT FORGET YOUR PASSPORT.** You **CANNOT** travel without it.
- b) It is your responsibility to get to and from our U.S. departure city. Due to the different provinces we travel to in Cuba, and airports that commercial airlines fly into in Cuba, our U.S. departure city is subject to change from trip to trip.
- c) Make sure to schedule your connecting flight to and from our U.S. departure city giving yourself enough time to connect with the rest of the group. If you need advice about booking your connecting flight, call us at 706-353-1546. Changing your ticket at the last hour incurs an expense of \$250 or more from the airline and creates a stressful situation for you.

**RBM cannot assume responsibility for any expenses you may incur if you must change your travel plans.**

**I have read the Travel Disclaimer Information above. I understand clearly and agree to these terms.**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name (Printed):** \_\_\_\_\_

*Please sign and date this form. Make a copy for your records and then return it to:*

**Rick Bonfim Ministries  
P.O. Box 5188 Athens, GA 30604**