

Short Term Ministry (STM) Application Addendum

Medical

List allergies:		Blood type:
Do you have a medical condition or need that could impact you or other Team Members? YES NO	Describe your medical condition/need:	
If yes, do you have your doctor's approval to go on this STM trip? YES NO	Medications you are currently or anticipate taking on STM trip:	
My doctor's name:	My doctor's email:	
My doctor can be reached from overseas by phone at:		
Health insurance name, policy #:		
Health insurance contact info:		

Recommended vaccines include MMR, Hep A, and Tetanus

Depending on the location of this ministry, you also may want to consider other immunizations such as: Yellow Fever, Typhoid (oral is preferred), and others. Please check with your family physician or international travel medical clinic.

Change Log

Revision #	Date	Description	Author
0	4/1/2021	Released	Mission Team