



AIM Stateside Outreach Form

Church/District: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: () _____ Fax: () _____

Outreach Coordinator: _____

Mobile Phone: () _____ E-mail: _____

Trip Supervisor: _____

Mobile Phone: () _____ E-mail: _____

REQUIREMENTS:

1. List all AIM trips you intend to take:

City/ State	Date (mmddyyyy)	Host Missionary/ Pastor	Team Size	Approx. Cost	Outreach Description

2. Obtain and attach a copy of the written invitation(s) from the host missionary(ies).

3. Read the "AIM Requirements" found at www.aim.ag.org, and sign/date below.

- I have read the "AIM Requirements" and will abide by all stated rules and regulations.
- I have completed background checks on all adults and leaders participating in this trip.
- I have the signed "Assumption of Risk" forms on file for all persons 18 years of age and older who are participating in this trip.
- I have all of the fully-completed and signed "Parental Consent" forms on file for all minors who are participating in this trip.
- I have obtained full insurance coverage for all individuals through Special Markets Insurance Consultants.
- I have notified my District Youth Director (DYD) in writing about my trip.

Your Signature/Date

Trip Supervisor Signature/Date

4. Return this completed form and the written invitation to:

Ambassadors in Mission (AIM)
 1445 N. Boonville Ave., Springfield, MO 65802
 Phone: 417.862.2781 x4039 ☎ Fax: 417.862.1693 ☎ E-mail: aim@ag.org