



United Methodist Volunteers in  
Mission  
Oregon-Idaho Conference

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## TEAM LEADER FORMS

### Team Registration Application \*

**UMVIM Team Registration, Background Check Request and Insurance Reimbursement.** This form has multiple uses. It is recommended that you complete it on your computer, then simply adjust checked boxes for each purpose.

- The **first** is to register your team, check the Team Registration box.
- If you need to make corrections to your team roster, submit with the Roster Amendment/Addition box checked. Strike out members that are being removed or add new members.
- To request background checks, mark the Background Check box. Then put a check or 'x' alongside any members that need a background check. If you/they are not sure and don't have documentation, I can check my database before submitting. Everyone needs to have background checks done every two-years.
- For Insurance Reimbursement, complete the additional information under **Insurance Administrative Cost Reimbursement**. Then submit that same form along with proof of payment.

**Domestic/International Travel Insurance Form.** Fill this out and send along with the **Individual Insurance Applications** for your team members, along with payment to Western Jurisdiction as directed. This can now be done on-line. <http://umvimwj.com/team-insurance/>

\* Registration consists of these actions on the part of the Team Leader:

1. Completion and submittal of a **Team Leader Application**, to be renewed every four-years, to the conference UMVIM coordinator.
2. Completion and submittal of a **Team Registration/Background Check Request/Insurance Reimbursement** to the conference UMVIM coordinator; ideally, this is submitted early in the team formation process so that the UMVIM coordinator can be of the most assistance.
3. Prior to departure, confirmation that all team members are appropriately insured; this will be a confirmation letter or email from the accident insurance carrier along with the first page of each team member's medical information form that includes their personal medical insurance information.
4. Prior to departure, completion and submission of a final roster of team members, including the contact details for each member.

# TEAM MEMBER FORMS

## **In-State/In-Conference Mission Packet**

1. Medical and Emergency Information Form with an attached copy of team member's Medical Insurance Card+
2. Mission Covenant Form and Safe Sanctuaries Agreement
3. Liability and Photo Release
4. Parental Consent Form\* (members under 18)
5. UMVIM-WJ Insurance Application (unless working in your local area and returning home each night)

## **Out-of-State/National Mission Packet**

1. Medical and Emergency Information Form with an attached copy of team member's Medical Insurance Card **and** Driver's License
2. Mission Covenant Form and Safe Sanctuaries Agreement
3. Liability and Photo Release
4. **Notarized** Parental Consent Form\* (members under 18)
5. UMVIM-WJ Insurance Application\*\*

## **International Mission Packet**

1. **Notarized** Medical and Emergency Information Form with an attached copy of team member's Medical Insurance Card **and** Passport
2. Mission Covenant Form and Safe Sanctuaries Agreement
3. Liability and Photo Release
4. **Notarized** Notification of Death
5. **Notarized** Parental Consent Form\* (members under 18)
6. UMVIM-WJ Insurance Application\*\*

## **Optional Forms** – to be used at Team Leader's discretion and depending on mission site

1. Team Member Application
2. Healthcare Professional's Information and Team Member Certification

+ In-Conference mission participants without medical insurance should purchase accident insurance as for National missions. Contact your team leader or conference UMVIM coordinator.

\* For out of state and/or out of country trips, the *Parental Consent Form* must be signed and **notarized** by **both** parents or legal guardians for each minor on the team, even if one or both parents (guardians) are part of the team. If one parent is deceased, attach a copy of the death certificate; if one parent has sole legal custody due to divorce, attach a copy of the divorce decree. For in state trips, a signature by one parent or guardian is sufficient. State and country are defined by the youth's primary residence.

\*\* The Insurance Application form **NEEDS TO BE SENT TO UMVIM-WJ** along with the Travel Insurance Form.

Form Distribution/Disposition:

- An electronic copy of **ALL** completed forms must be forwarded to the Team Leader's home [Conference UMVIM Coordinator](#) for backup use during the team's mission trip. Following the mission trip, the forms will be forwarded to the Conference Office for long-term retention. See the UMVIM Guidelines and Policy Document for retention details.
- The Team Leader carries the signed originals of the *Medical and Emergency Information Form*, and as appropriate, *Notification of Death* and *Parental Consent*, forms on the mission trip itself. It is recommended that the medical forms be placed in a sealed envelope to be opened only in an emergency. Any youth travel consent forms should be packaged separately from the medical forms as they may need to be more readily available. The Team Leader should ensure that several trusted adults know the location of these forms in event of an emergency. At the completion of the mission and after an electronic copy of all forms has been delivered for long-term retention as specified above, all originals are to be shredded.
- Electronic or paper copies of the *Medical and Emergency Information Form*, and as appropriate, *Notification of Death* and *Parental Consent*, forms can be sent to another readily contactable person (e.g. team's pastor at home) for backup use during the team's mission trip. This copy of forms, electronic or paper, is to be shredded or deleted on the team's return.

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