

**Appendix B**  
**First Baptist Church Pelham**  
**Individual Mission Trip Funding Request**

(Form must be submitted 120 days prior to planned departure date.)

Date Request Submitted \_\_\_\_\_

Submitted by \_\_\_\_\_

Dates of planned trip \_\_\_\_\_

Organization Sponsoring Trip \_\_\_\_\_

Destination \_\_\_\_\_

Estimated Number of FBCP Members \_\_\_\_\_

Estimated Costs Total per person \_\_\_\_\_

Trip Sponsor \_\_\_\_\_

Approved By Trip Sponsor \_\_\_\_\_

Approved By FBCP Minister \_\_\_\_\_

Amount Funded per FBCP Member \_\_\_\_\_

Approved by Missions Committee (Date) \_\_\_\_\_

Signed \_\_\_\_\_ Missions Committee Chairperson

Communicated back to Requestor (Date) \_\_\_\_\_

Copy to Financial Administrator (Date) \_\_\_\_\_