

**Appendix A**  
**First Baptist Church Pelham**  
**Mission Trip Funding Request**

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

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

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

Date of planned trip \_\_\_\_\_

Destination \_\_\_\_\_

Activities Planned and Goals

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Estimated Number of FBCP Ministerial Staff \_\_\_\_\_

Estimated Number of FBCP Non-ministerial Staff \_\_\_\_\_

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

Estimated Funding Requested \_\_\_\_\_

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

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

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

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

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