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 initial, sign, and date below.
   - I have read the "AIM Requirements" and will abide by all stated rules and regulations.

     _____ Initial _____ Date

   - I have notified my District Youth Director (DYD) in writing about my trip.

     _____ Initial _____ Date

_____ Your Signature _____ Trip Supervisor Signature

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