



**2010 AB Women's Ministries
Mission Encounter
to
Illinois
Co-sponsored with
National Ministries,
American Baptist Churches USA
September 18 - 26, 2010**

Thank you for requesting information on the 2010 Mission Encounter to Illinois, September 18 to 26, 2010 co-sponsored by AB Women's Ministries and National Ministries. Enclosed is the information you requested. You've chosen a great tour to consider! We hope you will join us as we experience God's work in Illinois.

Experience firsthand what God is doing in communities throughout Illinois with our own home-based missionaries acting as your tour guide. Stops will include a visit to Peoria Friendship House to learn about their ministries and to work with the Matthew 25 Jewelry Cooperative, a multi-year Break the Chains grant recipient, and Judson University where we will be immersed in a day of learning about Baptist heritage. We will visit Kids Hope United to learn ways of becoming better advocates for our children. We will also have a variety of worship experiences at American Baptist congregations throughout Illinois.

The cost of the tour is approximately \$1,200.00 and includes overland travel within Illinois, overnight accommodations, entrance fees, food and tips. Travel to and from Illinois is not included. The payment schedule is in the instructions. You'll also find an application, personal reference, and physical examination forms.

Please study the enclosed one-page summary of the goals and expectations of the AB Women's Ministries Mission Encounter Program. Note that if you participate in the tour, you agree to share your experience with women's groups and churches. In applying, please follow the directions on the general instruction form.

Finally, travel with a group involves responsibilities for all members. Our travel instructions list some of these responsibilities.

If you have any questions, please contact either the American Baptist Women's Ministries office or Victoria Goff at the addresses or numbers following. We're looking forward to hearing from you soon!

Phyllis Brown, Business Manager

American Baptist Women's Ministries
PO Box 851
Valley Forge, PA 19482-0851
(800) ABC-3USA, ext. 2285
(610) 768-2285
phyllis.brown@abc-usa.org

Victoria Goff, Tour Leader

National Ministries
PO Box 851
Valley Forge, PA 19482-0851
(800) ABC-3USA, ext. 2449
(610) 768-2449
vgoff@abc-usa.org

We are limiting the number of participants to 15 including Victoria Goff, National Ministries Coordinator and Tour Leader. We reserve the right to cancel the tour if the participant group numbers less than 5 persons.

You will be notified by May 17, 2010, as to whether you have been chosen as a participant. Consideration will be given to the postmark on your application and the number of previous mission encounters in which you have participated. We will give priority to those who are first-time applicants. Interest in this Mission Encounter is high, so we encourage you to submit your application as soon as possible. If you are not accepted, your initial \$50.00 payment will be refunded, so you have nothing to lose and everything to gain!

Enclosed:

General Instructions

Program Goals and Expectations

Application

Personal Reference Form

Confidential Evidence of Physical Examination

Travel Instructions

2010 Mission Encounter to Illinois
September 18 - 26, 2010
General Instructions

1. Read the Mission Encounter Program Goals and Expectations.
2. **Application.** Complete the enclosed application form and mail it with **a recent photo of yourself (preferably a digital photo e-mailed directly to phyllis.brown@abc-usa.org)** and a check for \$50.00 made payable to American Baptist Women's Ministries to:

Mission Encounter Tours
American Baptist Women's Ministries
P. O. Box 851
Valley Forge, PA 19482-0851
info@abwministries.org

Receipt of your application will be acknowledged. You will receive additional information about the tour from the tour leader.

To be considered in the first round of applicants, **your application must be postmarked no later than May 3, 2010.** The maximum number is 15, including the tour leader. If there are more than 15 applicants, preference will be given to

- First-time Mission Encounter participants
 - Women who are active in their church's women's ministries
 - Women who have experience and opportunities to interpret their experience to American Baptist women in their Area/Association and Region
 - Assure diversity among participants (geographic representation; age; racial/ethnic)
3. **References.** Three references are required. Select these people, not related to you, from the following sources:

- Region/State AB Women's Ministries officers
- Region/State Minister of Mission Support
- Members of the pastoral staff of your church
- People who have known you for at least 5 years.

A reference form is included in this packet. Please duplicate it and give one to each of your three referral people along with a stamped envelope addressed to:

Mission Encounter Tours
American Baptist Women's Ministries
P. O. Box 851
Valley Forge, PA 19482-0851
Fax: 610-768-2286

Please ensure that your references are received by August 2, 2010.

4. **Physical Examination.** Confidential evidence of your physical examination form must also be mailed to Phyllis Brown, AB Women's Ministries, PO Box 851, Valley Forge, PA 19482-0851 no later than August 2, 2010.
5. **Insurance Card.** Please send a copy of your insurance card with your application form.

6. **Payments:**

\$ 50.00 (NON-REFUNDABLE) initial payment, due on May 3, 2010, with your application.

\$550.00 due June 1, 2010

\$600.00 due July 15, 2010

The total estimated cost of \$1,200.00 may change. This includes:

- All overland travel.
- All overnight accommodations.
- Most entrance fees, food, and tips.
- Administrative costs to AB Women's Ministries.

Make all checks payable to **AB Women's Ministries**. Send checks to

Mission Encounter Tours

American Baptist Women's Ministries

P. O. Box 851

Valley Forge, PA 19482-0851

7. **Additional Costs.** You will need to cover the following additional costs:

- Round trip transportation between your home and Chicago, Illinois.
- Trip cancellation insurance (strongly advised).
- Medical examination, required for application.
- Film and development, souvenirs, personal items.
- Thank-you hostess gifts.

8. **Cancellation and Refunds.**

After you have been accepted for the trip, and you find you must cancel your participation, you must do so in writing to Phyllis Brown, Business Manager, AB Women's Ministries office, P. O. Box 851, Valley Forge, PA 19482-0851. Fax: 610-768-2286. Cancellation refunds will depend primarily upon refund restrictions of deposits paid on your behalf that we are unable to recover *and* as outlined below.

\$50.00 INITIAL PAYMENT IS NON-REFUNDABLE.

If Phyllis receives your written notification to cancel after June 1, 2010, she will refund the money you have paid, less a \$125 cancellation fee and any charges and fees already paid on your behalf that we cannot recover.

If you secure an acceptable substitute, any additional charges for transfers and changes are applicable and due from your substitute, in addition to her application fee and scheduled payments.

The amount you forfeit could result in a rather sizeable amount, so we recommend trip cancellation insurance to protect you from those unexpected family emergencies or illnesses that would cause a cancellation.

American Baptist Women's Ministries is committed to a policy of inclusiveness that reflects the diversity of membership of American Baptist Churches USA.

**2010 Mission Encounter to Illinois
September 18 - 26, 2010**

Program Goals and Expectations

American Baptist Women's Ministries mission encounters give women opportunities to develop through learning, experiencing and sharing with Baptist sisters a greater vision of God's power at work in their ministries and the church as a whole.

Goals:

1. To give women the opportunity to:
 - Learn about and experience American Baptist mission.
 - Develop a sense of partnership with national leaders and American Baptist missionaries.
 - Connect with women in the churches visited, i.e., build relationships woman to woman.
 - Learn about the concerns, needs, and gifts of women in Illinois.
 - Have hands-on mission experiences.
 - Share the Mission Encounter experience with others.
2. To select Mission Encounter participants who represent our diversity and inclusiveness and who are:
 - Faithful in representing American Baptist Women's Ministries and American Baptist Churches USA to the church groups and persons visited.
 - Committed to the goals of the Mission Encounter Program.
 - Sensitive to the need for cooperation during the mission experience.
 - Physically able to fully participate in occasionally rigorous travel activities.
 - Willing to learn and participate in new experiences.
 - Good communicators who are willing to interpret the Mission Encounter when invited to do so.
3. To provide a Mission Encounter that will:
 - Provide tools for participant education, discussion, debriefing, and processing.
 - Choose participants representing various regions.
 - Have a defined process to select applicants.
 - Publicize intentionally and strategically.
 - Keep in contact with applicants.

Expectations of Participants:

- To study the preparatory reading materials.
- To pay their Mission Encounter expenses and remit fees as indicated by stated deadlines.
- To participate fully in the briefing and debriefing meetings of the group and to complete the evaluation form.
- To be available and willing to give ten (10) interpretive presentations on the Mission Encounter experience over a two-year period. This might include public speaking, leading worship services, and writing articles.

The tour leader may assist in preparing a slide script for you to use which can be changed to fit your need. You will receive information on how to prepare and present a mission report effectively.

When accepting a speaking opportunity, a tour participant is responsible to arrange with the host group to pay the travel/room/board costs incurred, unless she is willing to assume those expenses herself.

**2010 Mission Encounter to Illinois
September 18 - 26, 2010**

Application

Please Print or Type:

I am supplying the following information as my application for the 2010 Mission Encounter to Illinois.

Legal Name _____

Name as you would like it on your name badge _____

Address _____ Day Phone _____

City/State/ZIP _____ Evening Phone _____

E-mail _____ Region/State _____

Date of Birth _____ Age _____

Name of the church where you are a member _____

Church Address _____

Your Pastor's Name _____

Please complete the following sentence:

I would like to participate in the Mission Encounter to Illinois because . . .

Describe your involvement in AB Women's Ministries or on your local church Mission Committee in the past 5 years.

Describe how you stay informed about American Baptist mission.

Why are you committed to the mission outreach of American Baptist Churches USA?

Describe your responsibilities (current or past) for mission promotion or education in your local church, Area/Association, and/or Region/State.

If you've ever participated in an AB Women's Ministries Mission Encounter or study tour, please state where and when (all of them).

Please share any special medical concerns, physical, or emotional needs. Before final selection, all tour participants will be asked to have a physician complete a confidential health examination form.

Tell us about your skills in the following areas by circling the appropriate number using the scale of 1-6. (1-2 need training, 3-4 average, 5-6 experienced/expert)

writing	1	2	3	4	5	6
photography	1	2	3	4	5	6
public speaking	1	2	3	4	5	6
journaling	1	2	3	4	5	6

Please share any other information you feel would be helpful in considering your application. You may attach another page if you wish.

I have read the goals and expectations of participants in the AB Women's Ministries Mission Encounter. I will abide by them, participating fully and cooperatively in the 2010 Mission Encounter to Illinois and will complete the interpretation commitment when I return home.

Signature _____ Date _____

Send this application by May 3, 2010 with a \$50.00 application fee and your photo to:

**Mission Encounter Tours
AB Women's Ministries
P. O. Box 851,
Valley Forge, PA 19482-0851
info@abwministries.org**

If you have any questions, contact:

Victoria Goff, Tour Leader
National Ministries
PO Box 851
Valley Forge, PA 19482-0851
610-768-2449
800 ABC-3USA, ext. 2449
vgoff@abc-usa.org

**2010 Mission Encounter to Illinois
September 18 - 26, 2010
Personal Reference Form**

Please Print or Type:

Part A. Tour Applicant: Complete Part A prior to giving it to the person who is supplying the reference.

Name of Tour Applicant _____

Street Address _____

City, State, ZIP _____ Phone _____

Part B. Reference: Complete Part B and send it to **Mission Encounter Tours, American Baptist Women's Ministries, P. O. Box 851, Valley Forge, PA 19482-0851 (Fax: 610-768-2286)** by August 2, 2010.

The Tour Applicant wishes to participate in a Mission Encounter Tour offered by American Baptist Women's Ministries and National Ministries. Please share what you know about the following:

1. Her ability to get along with others

2. Her ability to communicate and interpret to others what she has experienced

3. Her ability to handle stressful or uncomfortable situations

4. Her ability to adapt to different and sometimes difficult living conditions

5. Her emotional health

6. Her physical health

Use the back of this form for any additional comments. All information is confidential.

Signature _____ Date _____

How long have you known the applicant? _____ In what relationships? _____

Name _____ Phone _____

Street Address _____

City/State/ZIP _____

Thank you for your help.

2010 Mission Encounter to Illinois, September 18 - 26, 2010

Confidential Evidence of Physical Examination

This portion to be completed by the tour participant prior to the exam.

Name _____

Street Address _____

City, State, ZIP _____

Dates of Tour _____ Home Phone _____

Names, addresses, and phone numbers of persons to contact in case of an emergency:

1. _____

2. _____

3. _____

This portion to be completed by the physician. When complete, the tour participant should send it to **Phyllis Brown, Business Manager, American Baptist Women's Ministries, P. O. Box 851, Valley Forge, PA 19482-0851** by August 2, 2010. Please note that this medical information will be kept in a confidential file by the tour leaders and, if needed, shared with a health care provider. This form will be destroyed at the end of the tour.

Does the above named tour participant carry a health record, such as a Medic-alert bracelet? If so, please describe:

List all known allergies or allergic reactions:

List all current medication(s) she is taking:

List all medications you have prescribed for this tour:

List all vaccinations you recommend and will administer prior to the tour:

The above named woman was examined by me on the date listed below and is not now afflicted with any disorder, disease, allergy, disability, or other form of malady that would adversely affect either her participation in rigorous travel activities of the **Mission Encounter to Illinois** or the welfare of other tour participants.

Signature _____ Date _____

Name _____ Phone _____

Address _____

2010 Mission Encounter to Illinois
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Travel Instructions

Victoria Goff is the leader of this Mission Encounter, on behalf of AB Women's Ministries and National Ministries, American Baptist Churches USA.

Responsibilities of Leader:

Victoria

- will provide experiences, as much as possible, as outlined in the itinerary.
- will relate daily time schedules, meeting places, points of departure, and other announcements of importance.
- may ask you to extend greetings on behalf of the group.
- may ask you to lead in devotions.
- will be alert to your personal needs.
- will make final decisions.

Responsibility of Tour Members:

- follow instructions carefully and be prompt.
- keep a record of your personal money (cash and Travelers Checks).
- pay any personal bills at once for items other than those included in tour package.
- inform tour hosts immediately of illness or any other problems.
- take notes and/or keep a daily diary and review it nightly.
- check your room carefully upon departing.
- pay for overweight luggage.

Tour Members should not:

- expect others to handle their luggage at "transfer" points when no service is available.
- leave the tour group without checking with tour leader.
- leave luggage unlocked in their rooms.
- leave hand luggage, purses, etc., unattended.
- monopolize conversation with hosts, guides, etc.
- expect to sit in the same seat on buses or vans.

Arrival at hotel or housing facility

Victoria will contact the receptionist and receive room assignments and keys. **No other tour participants should go to the desk.**

The leader will give instructions about time schedules, food services, etc., before distributing room keys.

Words to travel by:

Cooperation, Courtesy, Patience, Respect, Promptness, Positive, Relax, Alert, Rest