



# Deposit Form

**PLEASE NOTE:** Your application for Gospel for Brazil Ministry Team participation cannot be processed unless the deposit amount is included with this form.

I, \_\_\_\_\_, wish to be considered as a GFB Ministry Team member for the Fortaleza and interior of Ceará, Brazil mission trip in June 2011.

**DEPOSIT AMOUNT INCLUDED:** \$\_\_\_\_\_ (\$200 per person)

Make checks payable to: Gospel for Brazil. If paying by credit card please provide your credit card information below. Your deposit can be made by credit card at no extra charge. There is no additional fee for using a credit card. All payments must be made in U.S. Dollars.

**SUPPORT FUND/DONATION POLICY:** Support funds/donations can be sent to the applicant or to Gospel for Brazil. Please include the applicant's name and trip by attaching a note. Please mark the envelope: ATTN: MISSION TRIP. All support funds/donations **must be received before the beginning date of the trip**. Any support funds/donations received on or after the date the trip has begun **will be returned to the donor**. Taxable receipts for donations will be mailed out at the end of the year.

**CANCELLATION & REFUND POLICY:** If you are not selected for a team, your deposit will be refunded in full. After your application has been processed, you may cancel up to four (4) weeks prior to your departure date in order to receive a \$100 refund of your deposit. If for any reason, a team member cancels after four (4) weeks prior to the departure date, the full deposit will be forfeited.

If for some reason you cancel your trip within 4 weeks of your departure date or after we have paid for your air flights, you will not be refunded for your ticket price. However, it is sometimes the case that the ticket can be reused in the future less a change fee (varies between \$75-\$200+). Also, you will forfeit your full deposit

In addition, you will not be refunded monies that Gospel for Brazil has paid out on your behalf to secure hotel, bus, and food service reservations. Any amount over and above the deposit, airline ticket, late cancellation fee, and reservation monies spent on your behalf will be refunded to you by check.

NAME

ADDRESS

CITY/STATE/ZIP

TELEPHONE

EMAIL (your email will only be used by Gospel for Brazil for informing you of activities conducted by GFB and maintaining contact with you; it will not be sold, loaned or otherwise made available to any entity)

## METHOD OF PAYMENT

*I understand and agree to the above cancellation and refund policy. If paying the deposit by credit/debit card, I authorize the above amount to be charged to my credit/debit card.*

CHECK # \_\_\_\_\_

CREDIT CARD  Mastercard  Visa  Discover

-  -  -  Exp.  /  CVV2

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_