

Managed Missions Application Instructions

Creating an Account

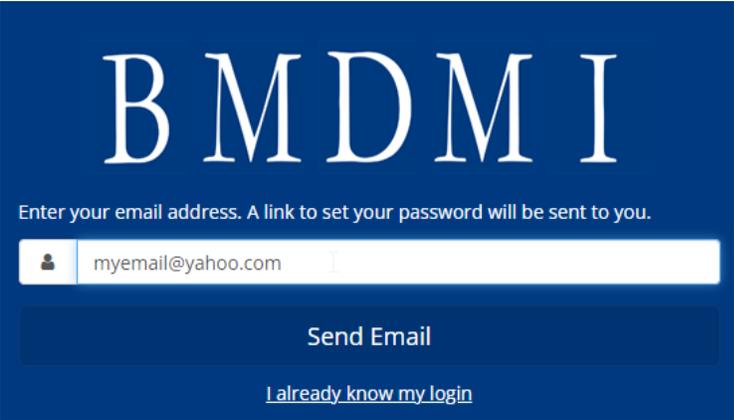
Start by visiting this URL in your browser:

<https://bmdmi.managedmissions.com/MissionApplication/Start/24081>

Choose “I don’t have a ManagedMissions login”.



On the next page, enter your e-mail address, and click “Send Email”.



Check your e-mail. You should have a message that looks like this. Click the link “Set My Password”.

Set Password Request



Managed Missions <go@managedmissions.com>

9:57 PM

To: [redacted]

Use the link below to set the password for [redacted] at app.managedmissions.com.

[Set My Password](#)

If you did not request this email or requested it accidentally, simply ignore this email and no change will be made to your account.

The link will take you to a page where you will set a new password.

The screenshot shows a blue-themed web form for setting a password. At the top left is the Managed Missions logo, which consists of a white cross inside a circle of dots, followed by the text "ManagedMissions" in white and orange. Below the logo, the text reads: "Use the form below to set a password on for your Managed Missions account using the following email address:". Underneath, the label "Email Address" is followed by a redacted email address. There are two input fields: the first is labeled "New Password" with a lock icon on the left and a speech bubble icon on the right; the second is labeled "Confirm Password" with a checkmark icon on the left and a speech bubble icon on the right. At the bottom of the form is a large blue button with the text "Set Password" in white.

Setting up your profile

Next, you will enter your personal information to build your profile.

Enter your personal info

* Indicates required field

First Name *	Nickname	
<input type="text"/>	<input type="text"/>	
Middle Name	Last Name *	
<input type="text"/>	<input type="text"/>	
Address 1 *		
<input type="text"/>		
Address 2		
<input type="text"/>		
Country *	State/Province *	City *
<input type="text" value="United States"/>	<input type="text" value="Select One"/>	<input type="text"/>
Postal Code *	Gender *	Birth Date *
<input type="text"/>	<input type="text" value="Select One"/>	<input type="text" value="MM/DD/YYYY"/>
	<small>Airline Designation for Travel Purpose only</small>	
Phone Number *	Phone Type *	T Shirt Size *
<input type="text"/>	<input type="text" value="Other"/>	<input type="text"/>

[← Go Back](#) | [Save](#) | [→ Next](#)

In order to return to your saved application, please use the following link:
<https://app.managedmissions.com/MissionApplication/Start/24081>

The next screen is to enter your traveler information. You can save at any point during the application. The bottom of the screen has a unique link you can use to return to your saved application.

Update your travel info

* Indicates required field

Exact Name on Passport * ⓘ

Passport Number *

Passport Issued Date

Passport Expiration Date *

Passport Issuing Country *

Nationality *

Preferred Airport

Frequent Flyer Number

Airline Seating Preference

TSA Known Traveler ID

Primary Emergency Contact

Name *

Relationship *

Phone Number *

Email Address *

Secondary Emergency Contact

Name <input type="text"/>	Relationship <input type="text" value="Select One"/>
Phone Number <input type="text"/>	Email Address <input type="text"/>

Health Concerns *

Dietary Restrictions *

Allergies *

Medications we need to know about *

Other Considerations *

[← Go Back](#) | [Save](#) | [→ Next](#)

Next you will upload a profile image. You can upload a photo from your mobile device or from the computer you are using for the application. You can skip this step if you do not have a picture available. Note that you can choose to crop your photo if it is especially large or has other people in it.

Upload Profile Image

Select an image to use as your profile image

① Choose the file you want to upload

No file chosen

② Select the portion you want to crop

③ Preview your image



Your Trip Application

After you complete your profile picture, the next page has a link to the application for the trip “FBC Olive Branch”. Click Next.

Your Trip

There is currently only one trip available for this application. You are applying for:
FBC Olive Branch

← Go Back

→ Next

The next page has additional travel questions. Answer these to the best of your ability. You should read through the full Team Member covenant and check all of the boxes. Also read through the legal release and check all of the boxes. Finally, complete the Medical release information. Then, click “Submit Application”.

Please answer the following questions

Additional Travel Questions

Are you a part of the Group Reservation?*

Please select one



If no, what is your preferred airport?



Personal Information

Have you been on a BMDMI mission trip before?*

Please select one



Year & Team Captain Name of most recent trip:

Marital Status*

Please select one



Spouse Name (if applicable):

Employer:*

Occupation:*

Professional Titles (Check all that apply):

- None
- MD
- DDS
- RPh
- Rev
- RN
- LPN

Other

Church you are member of:*

Church Phone

Church Address

If this is your FIRST BMDMI mission trip, please list two references we may contact (names & contact info):

Team Member Covenant

Because the primary goal of each BMDMI team is to present the Gospel of Jesus Christ to the people of Central America, it is important that our team members have a personal relationship with Jesus. As a Christian, you profess that you came to a time in your life when you realized that you were a sinner; that you could not save yourself; you believe that Jesus Christ is the one and only Son of God; that He died for your sins; and you repented of your sins and called upon Christ to save you. In light of this statement, please check one of the following:

- I agree with the previous statement and have accepted Christ as my Personal Savior.
- I have not yet accepted Christ as my Personal Savior but ask you to consider allowing me to join the team.

As a team member, I am:

- Willing to follow the doctrinal beliefs of BMDMI*
- Willing to abide by the BMDMI dress code as specifically detailed in the "One Week" brochure or online at <http://bmdmi.org/ministries/teams-2/>*
- Willing to refrain from use of tobacco products, alcohol or profanity while on the mission trip*
- Willing to refrain from pairing off between members of the opposite sex during the mission trip*
- Willing to perform any task assigned to me*
- The information I have supplied in this application is true, and I have carefully read, understood and agree to abide by all the covenant requirements listed above (including dress code requirements).*
- NOTE: BMDMI will arrange for the early return (at the team member's expense) to the United States of any team member that does not adhere to each of these guidelines. BMDMI reserves the right to decline any application for team membership for any reason, including (but not limited to) theological differences or personal behavior deemed incompatible with its ministry and/or testimony.*

**LEGAL RELEASE OF CLAIMS AND ACKNOWLEDGEMENT OF RISKS
ASSOCIATED WITH MISSION TRIP**

NOTICE: THIS IS A COMPLETE RELEASE OF POTENTIAL CLAIMS PLEASE READ EACH PARAGRAPH CAREFULLY AND CHECK TO INDICATE THAT YOU UNDERSTAND WHAT YOU HAVE AGREED TO.

I, the undersigned, understand I will be traveling to a foreign country or countries and participating in various mission activities which are sponsored or facilitated in whole or in part by BAPTIST MEDICAL & DENTAL MISSION.

LEGAL REPRESENTATIVES AND ASSIGNORS:

Full Name*

Date Consent Given*

MEDICAL HISTORY AND EMERGENCY TREATMENT RELEASE

Height & Weight*

If pregnant, stage of pregnancy.

Blood Type

Date of Last Tetanus Booster*

MEDICAL HISTORY AND EMERGENCY TREATMENT RELEASE

Height & Weight*

If pregnant, stage of pregnancy.

Blood Type

Date of Last Tetanus Booster*

Your Physician Contact Information

Physician's Name*

Physician's Address*

Physician's Phone Number*

Medical Consent

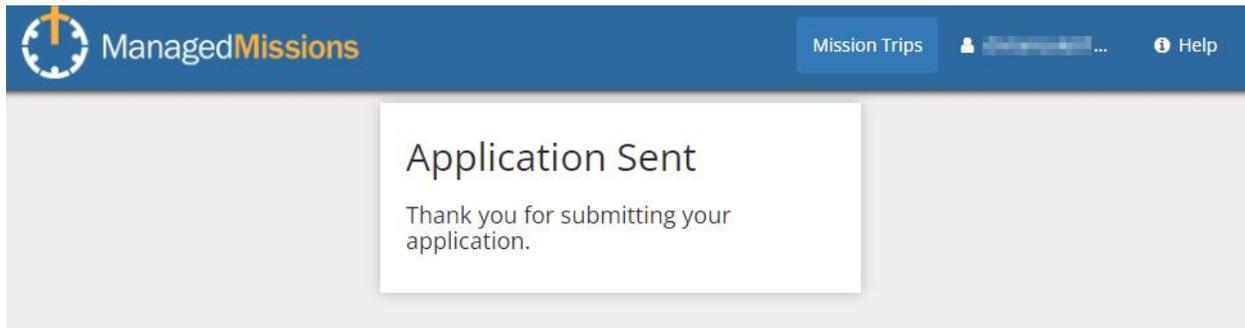
By checking this box, I authorize the personnel of Baptist Medical & Dental Mission International and/or the physicians on our team to obtain and administer emergency medical treatment for me should I become ill or incapacitated while on this BMDMI-sponsored mission trip. I also authorize the personnel of Baptist Medical & Dental Mission International and/or the physicians on our team to obtain and administer emergency medical treatment for any child of mine on this trip should I become incapacitated or am unable to be contacted.*

[← Go Back](#)

| [Save](#)

| [Submit Application](#)

After you submit the application, you will get a final confirmation screen:



After the application is submitted

Check your personal e-mail. You should have a message indicating the application was successfully submitted. There is also a link to view the submitted application, but it just takes you to the “Application Sent” screen.

After your application has been reviewed by the team administrator and BMDMI you will receive an email stating you have been added to the team.