Missionary Travel Association						Vest Shore Blvd. uite 650	REQUIRED ⇒	Missions INTERNATIONAL	
Email to: MTAservices@gowithmta.com						oa FL 33607 52) 678-5885	"X" ONE	Missions Home/Domestic	
	urch/Organization/Individual Nan		Church/Organization/Individual Name			ID Number	Destination City(s)		
-	zation/Individual Contact PERSC		Contact Person Address				, ,		
Church/Organization/Individual Street Address: Church/Organization/Individual:			Phone City		State	ZipCode	Destination Country(s)	:	
Church/Organization/Individual:			EMAIL to receive		Country	Travel Start Date			
Team Name:			2.77.112 to 100011			Travel End Date			
Team Leader [Going on the Mission trip]:			Team Leader				To ADD the Optional <u>Cancellation and Interruption</u> Coverage		
Team Leader Information:			Email			Phone	please "X" the box under "Add C&I"		
						C&I cost is \$4.00 per trip day			
ID#	First	MI	Last	Email - not required		Birthdate	Passport #	Beneficiary - not required	Add C&I
	Excel Registration Form Instructions								
	[The COI Registrar is Encouraged to use the Online Registration]								
The Excel Registration Form is useful when the COI has a very large team									
That has a limited number of members with a Member ID#									
When completed email the Excel as an attachment in the original format to mailto: MTAservices@gowithmta.com							withmta.com		
	[do not send as a Cloud document or change that format]  1. Enter all dates as [example]: 8/4/2011 2. COI ID#: a new COI well not have one leave blank one will be assigned for future use. 3. COI Information: Name, Contact Person, Address, Phone, City, State, Zip Code, Email, Country								
a. Changes to the COI's information must be requested by the COI to MTA  4. Team Information: Tean Name, Team Leader, Email, Phone  5. Trip Information: Mark 'X' International or Home/Domestic Trip, Destination City, Destination Country, Departure Date, Return Date  a. If you mission trip will be in more that one city or country							_		
							rture Bute, Return Bute		
	i. Please list cities [example]: Buffalo, Toronto, etc.								
ii. Please list countries [example]: USA, Canada									
6. List All members who are wanting MTA Coverage on the mission trip  a. Member ID#: a new member will not have one leave blank one will be assigned for future use.									
b. Required: First & Last Name, Date of Birth									
c. To add the Optional Cancellation and Interruption Coverage:									
i. Please 'X' the cell under "Add C&I"  d. Passport #: requested for INTERNATIONAL mission trips [needed if member needs help]									
e. Not required:							<u> </u> _		<del>                                     </del>
i. Member's email							<b>⊩</b>		
ii. Beneficiary: if a name is not provided the database will automatically insert 'Estate'									
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