Mexico is celebrating its 30th anniversary with A.C.E. in 2013!

Mexico City, Mexico

ACEM SERVICE ADVENTURE

July 2–July 16, 2013

What Is the Service Adventure?

The Service Adventure is a short-term mission trip that challenges you to experience service and ministry on a whole new level. For two weeks next summer, you can join participants from different countries as they come together for one purpose—to become better prepared to serve the Lord. Whether that means serving in your neighborhood, in another part of the world, or possible service through the Educational Assistance program for graduates, you will catch a lifelong vision of a world in need of Christ!

You will have the opportunity to serve the Lord through serving others in need. Be challenged as you step out of your comfort zone and explore a different culture. Meet new people and make friends that will last a lifetime!

Training for Service

Surrounded by Mexico's countryside, the first week of the Service Adventure will be spent at Instituto Carver, a school in Toluca, in the state of Mexico. There you will grow and be challenged along with your team members as you participate in training for ministry and learn to work together through team-building activities as you prepare to serve the Lord and the people of Mexico.

Training for service includes learning how to recognize and fulfill your unique calling by studying what it means to serve the Lord wholeheartedly. Inspiring evening devotions challenge you to action through God's Word, prayer, and Scripture memory. Preparation for service also includes practical classes and activities such as cross-cultural orientation, puppetry, language lessons, and school furniture construction skills.

Service in Action

Once training is complete, the second week will be spent serving and ministering at needy schools that use the A.C.E. program. You will travel with your team to spend at least five days implementing what you have learned. Teams will enjoy getting to know the people as they minister, build student offices, paint, and do whatever they can to help these schools prepare for the new school year. Participants will have the chance to take part in sharing the Gospel through their testimonies as well as puppetry or drama.

At the end of the Service Adventure, fellow participants and leaders will return to Misión Mazahua for a day of rest and debriefing. Debriefing is an essential part of the Service Adventure experience because it allows participants to make an overall self-assessment of physical, emotional, mental, and spiritual growth. This is a time for evaluating personal and group experiences, preparing a video presentation to share your adventure, and applying what you have learned to everyday life.

Who Can Attend?

All participants should be at least 16 years of age by June 1, 2013. Attendees must be using at least three subjects from the A.C.E. curriculum, be a graduate who used the curriculum, or a parent or staff member associated with A.C.E. Participants under the age of 18 must have written permission from a parent/guardian. A written recommendation from his/her pastor or supervisor will be required. We encourage adults of all ages to participate as the Service Adventure is not just for young people.

To better prepare students, two exciting PACEs must be completed prior to attending. The A.C.E. Global Advancement Department will provide these PACEs to all registered participants.

Practical Missions Elective

High school students can now take part in a new Practical Missions elective course by participating in the Service Adventure and completing one training PACE in conjunction with the Soulwinning PACE. At the end of the Service Adventure, participants will receive a certificate that states they have successfully qualified for this half credit. We encourage students who desire to learn more about missions to take the Introduction to Missions PACEs 1–6 that also count as a half credit, together providing a full missions credit.

How to Register

Step One: To apply for the Service Adventure, send the following printable forms with a **nonrefundable** $40 registration fee before **May 3, 2013,** to **Service Adventure, Accelerated Christian Education Ministries, P.O. Box 160328, Nashville, TN 37216. Or email to hisservant@aceministries.com or fax to 615-612-6069.**

- Registration (be sure to include a passport picture or a school picture!)
- My Christian Testimony
- Why I Want To Attend
- Consumer Authorization (only if aged 18 and older)
- Character Reference (sent to ACEM by your pastor/supervisor)
- Nonrefundable Registration Fee of $40

NOTE: Be sure you have a valid government-issued passport. You must have at least three months of time left on your passport at the end of Service Adventure. Check to see if you need a visa to enter Mexico. U.S. citizens do not need a visa.

Step Two: Once you have been accepted, you will receive a packet with a letter, your two PACEs to complete, and any information that you may need to proceed with the registration process. To complete registration, send the following items to ACEM to the above address before **June 14, 2013.**

- Health Status
- Medical Release
- Model/Photo Release
- Release of Liability
- Training and Transportation
- Service Adventure Fee of $298

Please email a recent digital photo (passport style of you wearing your SA shirt).

NOTE: Be sure to secure a passport (if required for travel outside your country).

The Cost

Cost for participation is **$298**. This fee covers room, meals, equipment, supplies, class materials, training, and local transportation during the Service Adventure. This fee is due June 14, 2013. Air travel arrangements to and from Benito Juarez International Airport (MEX) in Mexico City or the Toluca International Airport (TLC) in Toluca should be made by each individual participant before June 14, 2013. (The participation fee of $298 does **NOT** include the round-trip ticket from your home to Mexico City and is in addition to the $40 registration fee.)

Transportation

Each participant is responsible for making travel arrangements to Benito Juarez International Airport or the Toluca International Airport (Licenciado Adolfo Lopez Mateos International). Please contact us for consultation prior to making your travel arrangements! Transportation to and from the airports will be provided. All flights should be scheduled to arrive at the Benito Juarez International Airport or the Toluca International Airport on July 2 and should depart on July 16. Please do not request an exception. Please remain in the waiting area after you exit customs for someone from Service Adventure to meet you.

For More Information

If you would like to learn more about how you can experience this life-changing Service Adventure, please email hisservant@aceministries.com or call 615-612-5200.

Do you want to be an additional blessing? Your church or school can help raise funds for student office construction ($40 per office) or to purchase other Learning Center needs for the school in which you will serve. If you would like to make donations to help with tools and materials, email the address listed above.

WHAT TO BRING
CHECKLIST

General Items

Required

- ❑ All documents and forms (see **HOW TO REGISTER** on page 2)
- ❑ Bible, pen, and notebook
- ❑ Spending money in small bills (keep in a money belt or zippered bag)—$40 is suggested
- ❑ Camera, batteries, and chargers
- ❑ Small flashlight, extra batteries
- ❑ Optional: small sewing kit
- ❑ Two refillable water bottles
- ❑ Sleeping bag or bedroll, flat sheet, and small pillow with an extra pillowcase
- ❑ Two lightweight bath towels and two washcloths
- ❑ Toiletries: i.e., toothbrush, soap, shampoo, hand sanitizer, laundry detergent, anti-diarrheal, Benadryl, insect repellent, sunscreen, and other essentials. **Bring travel size items!**
- ❑ Plastic bags for dirty laundry

Note: DO NOT BRING secular magazines or books. Cell phone usage will be limited.

Clothing – *bring 5 days worth of clothes*

Required for Both Genders

- ❑ Lightweight bathrobe
- ❑ Tennis shoes (two pairs) and socks
- ❑ Flip flops for use only in the shower
- ❑ Safety glasses, hat (or bandanna), and gloves (cloth or leather) for outside work
- ❑ Lightweight jacket or sweatshirt
- ❑ Rain gear: lightweight raincoat or poncho
- ❑ At least one outfit (including shoes) appropriate for Sunday morning worship
- ❑ Lightweight conservative pajamas with short sleeves

Note: The climate during the day is hot but cool during the evening. You will want to bring clothing for the day that is 100% cotton if possible. Also bring warmer clothing for sleeping and for evening activities.

Male

- ❑ Full-length denim or durable work pants (at least two pairs)
- ❑ Shirts with short or 3/4 length sleeves

Note: DO NOT BRING shorts, excessively baggy pants, cutoffs, tank tops, or sleeveless shirts.

Female

- ❑ Skirts at least to the bottom of the knees and/or culottes (skirtlike in appearance)
- ❑ Shirts or blouses with short sleeves

Note: DO NOT BRING shorts, gauchos, capris, pants, halter tops, form-fitting shirts, low-cut blouses, sleeveless shirts, curling irons, straighteners, or blow dryers.

Luggage

- ❑ Suitcase *(limited to one per participant)*
- ❑ Backpack or messenger bag
- ❑ Sleeping bag/bedroll

Note: We highly recommend luggage with rollers. Choose bags that meet current airline standards and that are easy to carry.

Attach a recent photograph of yourself here.

SERVICE ADVENTURE REGISTRATION

Step One

Date: _____

PERSONAL INFORMATION

Name: _____ Preferred Name: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Cell Phone (_____) _____ Email Address: _____

Age: _____ Height: _____ Weight: _____ Date of Birth: _____/_____/_____ Sex: ❑ M ❑ F

Country of Citizenship: _____ T-Shirt Size: ❑S ❑M ❑L ❑XL ❑XXL

PASTOR/SCHOOL INFORMATION

Pastor's Name: _____ Church Name: _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

School Name: _____ Administrator's Name: _____

Address: _____ City: _____

State/Province: _____ ZIP/Postal Code: _____ Acct. # _____

Phone: (_____) _____ Email Address: _____

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name: _____ Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Cell Phone: (_____) _____ Email Address: _____

List any medical problems or physical limitations: _____

_____

Describe your involvement with A.C.E. *(student, graduate, supervisor, parent, pastor, etc.)* _____

_____ Previous involvement in the Service Adventure: _____

Years with A.C.E.: _____ Year of graduation: _____ Denomination/Religious affiliation: _____

Current PACEs completed: (i.e., #1097, #1112): Math _____ English _____ Social Studies _____ Science _____

Language(s) spoken: First: _____ Second: _____ Third: _____

Special skills, talents, interests, or abilities: ❑ Music ❑ Art ❑ Drama ❑ Computer ❑ Carpentry ❑ Other *(Explain)*

_____

_____

Parent/Guardian Permission (if under 18): I give _____ my permission to participate in the 2013 ACEM Service Adventure.

Parent/Guardian Signature (if under 18): _____ Date: _____

Student Signature: _____ Date: _____

Your signature verifies that all information is accurate and correct. If getting assistance filling out this form, please indicate that person's name and give the reason.

Person assisting with form: _____ Reason: _____

Note: Applicants aged 18 and up will be asked to sign a release giving permission to complete a background check before acceptance.

MY CHRISTIAN TESTIMONY

(Use additional pages, if needed)

My salvation experience:

My participation in church and school activities:

Signature: _____ **Date:** _____

SERVICE ADVENTURE
WHY I WANT TO ATTEND

(Please type or print clearly.)

Name: _____

CONSUMER AUTHORIZATION

Step One

I. I understand that an investigative report may be generated on me that may include information as to my character, general reputation, personal characteristics, or mode of living; work habits, performance or experience, along with reasons for termination of past employment/professional license or credentials; financial/credit history; or criminal/civil/driving record history. I understand that General Information Services, Inc. (GIS), on behalf of Accelerated Christian Education may be requesting information from public and private sources about any of the information noted earlier in this paragraph in connection with Accelerated Christian Education's consideration of me for employment, promotion or position re-assignment or contract now, or at any time during my tenure with Accelerated Christian Education, and give my full consent for this information to be obtained.

II. IF APPLICABLE, medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws.

III. According to the **Fair Credit Reporting Act** (FCRA, Public Law 91-508, Title VI), I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer reporting agency. If so, I will be notified and be given the name of the agency providing that report.

IV. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this release shall be as valid as the original. This release is valid for most federal, state and county agencies.

V. I understand that if I am a resident of **Minnesota/Oklahoma (only)** I may obtain a copy of the report ordered, and now indicate my desire to do so by checking this box ☐.

VI. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer or insurance company contacted by GIS to furnish the information described in Section I.

VII. Upon proper identification, you have the right to make a request to GIS, within a reasonable period of time, as to the nature and substance of all information in its files on you at the time of your request, including the sources of information and the recipients of any reports on you that GIS has previously furnished. Communications with GIS should be directed to P.O. Box 353, Chapin SC 29036 or (866) 265-4917.

CANDIDATE COMPLETES THE FOLLOWING:

Signature _____ Today's Date _____

Please Print Full Name _____

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

Month, Day, And Year Of Birth _____ Social Security Number _____

Home Address _____ City State ZIP _____

Driver's License Number And State _____ Name As It Appears On License _____

Have you ever been convicted of a crime? No Yes If yes, please provide city and state of conviction and details of conviction.

_____

_____

FAIR CREDIT REPORTING ACT NOTICE

In accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), this information may only be used to verify a statement(s) made by an individual in connection with legitimate business needs. The depth of information available varies from state to state. Status of updates are available on request. Although every effort has been made to assure accuracy, General Information Services, Inc. cannot act as guarantor of information accuracy or completeness. Final verification of an individual's identity and proper use of report contents are the user's responsibility. General Information Services, Inc.'s policy requires purchasers of these reports to have signed a Service Agreement. This assures General Information Services, Inc. that users are familiar with and will abide by their obligations, as stated in the **FCRA**, to the individuals named in these reports. If information contained in this report is responsible for the suspension or termination of an employee or the application process, have the Candidate/employee contact General Information Services, Inc.

NOTICE TO CALIFORNIA CANDIDATES

You have a right to obtain a copy of any consumer report or investigative consumer report obtained by Accelerated Christian Education by checking the box provided below. The report will be provided to you within three (3) business days after we receive the requested reports related to the matter investigated.

☐ I request to receive a free copy of this report by checking this box.

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by GIS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at GIS in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

Step One

SERVICE ADVENTURE CHARACTER REFERENCE

(To be completed by someone other than a relative.)

Participant: Please fill in your personal information and give this form to your pastor or supervisor to complete.

Name: _____ Phone: (_____) _____

Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Dear Pastor or Supervisor: Thank you for assisting with the selection of participants for the ACEM Service Adventure. ACEM is endeavoring to assist mature, committed, Christian young people and adults to represent our Lord as His servants. The Service Adventure is a vital step toward this goal. With this in mind, we ask that you please fill out the Character Reference form and return it to: **Service Adventure, Accelerated Christian Education Ministries, P.O. Box 160328, Nashville, TN 37216.** All responses will be held in strict confidence.

- How long have you known this prospective participant? _____
- Your relationship with the prospective participant: ❑ Pastor ❑ Supervisor
- Please indicate character strengths and weaknesses in the following areas:

	Excellent	Good	Inconsistent	Poor	Unknown
Ability to follow direction	☐	☐	☐	☐	☐
Attitude toward authority	☐	☐	☐	☐	☐
Functions under stress	☐	☐	☐	☐	☐
Leadership qualities	☐	☐	☐	☐	☐
Working relationships with others	☐	☐	☐	☐	☐
Emotional stability	☐	☐	☐	☐	☐
Character and honesty	☐	☐	☐	☐	☐
Spiritual life	☐	☐	☐	☐	☐

- Please note anything, including areas of concern, about the prospective participant or his/her family that you feel we should know. _____
- To the best of your knowledge, does or has the prospective participant engage(d) in the use of tobacco, alcohol, or drugs? ❑ Yes ❑ No
- Is the applicant active in your church? ❑ Yes ❑ No If no, which church? _____
- What character(s) are demonstrated that you believe qualify this applicant to attend the Service Adventure? _____
- Has the applicant been previously involved in service opportunities? _____ If so, what was his/her participation? _____
- Please indicate your recommendation for this prospective participant.
  - ❑ Fully recommend
  - ❑ Not recommended at this time
  - ❑ Recommend with slight reservations

Your Name: _____ Phone: (_____) _____

Address: _____ Email: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Signature: _____

SERVICE ADVENTURE HEALTH STATUS

(Please type or print clearly.)

Name: _____ Date: _____

Please identify any medical conditions or limitations which might affect your performance during the ACEM Service Adventure: _____

Do you have any allergies that require special attention? If so, please explain.

_____

Do you require any medications? If so, please identify by prescription name:

_____

Do you have any dietary concerns or requirements? _____

Have you had surgery during the past 12 months? If so, please explain.

_____

Are you currently under a doctor's care? If so, for what condition?

_____

Doctor's Name: _____ Phone: (_____)_____

Doctor's Address: _____

Street City State/Province ZIP/Postal Code

Immunization History

Please list dates of most recent vaccination boosters.
Note: The following vaccinations are recommended but not required.

Vaccine	Date	Travel Immunizations	Date
DTP	_____	Hepatitis A	_____
Tetanus Booster	_____	Hepatitis B	_____
MMR	_____	Tuberculosis	_____
Polio	_____	Rabies	_____
Influenza	_____		
H1N1	_____		

IN THE EVENT OF AN EMERGENCY, CONTACT:

Name: _____ Relation: _____

Phone: (_____) _____ Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Insurance Company: _____ Policy # _____

Phone: (_____) _____ Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

SERVICE ADVENTURE MEDICAL RELEASE

(Please type or print clearly.)

I understand that attendance at the ACEM Service Adventure is voluntary. I release A.C.E. Ministries or Accelerated Christian Education, Inc., its employees, and Coordinatión de A.C.E. Mexico, A.C. or Accelerated Christian Education., Inc., including ACEM Service Adventure personnel, from any liability for accidents, sickness, or death that may occur while serving with ACEM Service Adventure, at all times and locations, during ACEM Service Adventure, including Misión Mazahua, A.C. facilities, and while in and/or en route to and from Mexico. Supervising personnel in leadership with whom I serve have my permission to take me to a doctor for medical treatment, emergency surgery, or hospitalization if the need arises. **I assume the responsibility of all medical expenses for myself.** Should circumstances require me to return home due to disciplinary action or for medical reasons, I will assume total transportation costs.

Name: _____

Phone: (_____) _____ Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Social Security Number: _____

Important: DO NOT SIGN except in the presence of witnesses. Witnesses must be unrelated to prospective participant and at least 21 years of age.

Participant Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____

Witness Signature: _____ Date: _____

Witness Signature:_____ Date: _____

Accelerated Christian Education
Accelerated Christian Education Ministries

MODEL/PHOTO RELEASE

(Step Two)

I hereby grant to ***Accelerated Christian Education Inc. (A.C.E.) or Accelerated Christian Education Ministries (ACEM),*** its nominees, designees, successors, and assigns or those for whom they are acting, the absolute right and permission to copyright, and/or publish photographic portraits or pictures of me, or in which I may be included in whole or in part, or composite, or distorted in character or form, in conjunction with my own or any other picture, name, or reproductions thereof in color or otherwise made through any media at its property or elsewhere, for art, advertising, business, or any other lawful purpose whatsoever.

I hereby waive any right that I may have to inspect and approve the finished product or the copy that may be used in connection therewith, or the use to which it may be applied.

I hereby release, discharge, and agree to hold harmless ***A.C.E. or ACEM***, its nominees, designees, successors, and assigns, or others for whom ***A.C.E. or ACEM*** is acting, from any liability by virtue of any use whatsoever, whether intentional or otherwise, or from any charge that may occur or be produced in the taking of said picture or pictures, or any processing rending towards the completion of the finished product, unless it can be shown that reproduction was maliciously caused, produced, and published solely for the purpose of subjecting me to conspicuous ridicule, scandal, reproach, scorn, and indignity.

Model Name _____
Please Print

Address _____

City _____ State _____ ZIP _____

Model Signature _____ Date _____

If under 21 years of age, the parent or legal guardian of the model must sign here:

_____ Date _____

parent and/or legal guardian of _____

do hereby consent and grant permission to the foregoing.

Witness Signature _____ Date _____

Print Witness Name _____

Accepted and acknowledged by ***Accelerated Christian Education or Accelerated Christian Education Ministries***

By _____ Date _____

SERVICE ADVENTURE
RELEASE OF LIABILITY

For providing minimal accidental insurance and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged and confessed, the undersigned individual hereby acknowledges that the undersigned has voluntarily elected to pursue certain educational activities with a full understanding of the risks involved therein, that the undersigned is responsible for acquiring any required travel documents and immunizations, and that in such pursuits the undersigned is not an employee, representative, or guest of Accelerated Christian Education Ministries (ACEM). The undersigned also represents to ACEM that (i) the undersigned or the undersigned's relatives have made adequate provision for the undersigned's care and return in the event of injury or sickness necessitating such return, (ii) provision has been made for the undersigned's return upon completion of the undersigned's educational activities therein, and (iii) all expenses incurred by the undersigned in connection with the performance of the undersigned's educational activities or otherwise shall be borne by the undersigned or the undersigned's sponsoring organization, and that ACEM shall have no liability whatsoever therefore.

Consequently, the undersigned with the intent of binding the undersigned and the undersigned's heirs, executors, personal representatives and assigns, hereby unconditionally releases, acquits and forever discharges ACEM, its successors and assigns, its officers, directors, shareholders, and employees from any and all claims, demands, actions, or causes of action of whatever kind, character and description, whether based on facts presently known or hereafter discovered, whether based upon statutory law or common law, whether known or unknown, which have accrued or which may ever accrue to the undersigned, the undersigned's heirs, executors, personal representatives and assigns, for and on account of all matters relating to the educational activities of the undersigned and the travel of the undersigned to and from such a location and the performance of the educational activities of the undersigned from the beginning of time until one year after the permanent return of the undersigned from such a location. This Release is for any relief, no matter how denominated, including, but not limited to, compensatory damages, punitive damages, and damages for pain and suffering or mental anguish, personal injury, medical expenses, and attorneys' fees and costs.

Name: _____

Address: _____

Social Security Number: _____

Important: DO NOT SIGN except in the presence of witnesses. Witnesses must be unrelated to prospective participant and at least 21 years of age.

Note: A parent/guardian must sign this release for persons under 18 years of age.

Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____

Witness Signature: _____ Date: _____

Witness Signature: _____ Date: _____

SERVICE ADVENTURE TRAINING AND TRANSPORTATION

(Please type or print clearly.)

TRAINING AFFIDAVIT

I, _____, have completed the His Servants Training PACEs under the supervision of ❑ Supervisor ❑ Administrator ❑ Pastor ❑ Other _____

Name: _____

Address: _____ Date: _____

Signature of Training Supervisor: _____

TRAVEL INFORMATION

I have made travel arrangements following my consultation with Accelerated Christian Education Ministries (ACEM), and I accept the responsibility for transportation to the ACEM Service Adventure and home again. I am traveling on the flights listed below or by the following methods:

ARRIVAL

Arrival Date: 7/2/2013 Method of Arrival: _____ Arrival Time: _____

Airline: _____ Flight Number: _____

Other mode of transportation—such as car or bus: please explain in detail how and exactly when you will arrive

_____

DEPARTURE

Departure Date: 7/16/2013 Method of Departure: _____ Departure Time: _____

Airline: _____ Flight Number: _____

Other mode of transportation—such as car or bus: please explain in detail how and exactly when you will depart

_____

Note: If applicable, please attach a copy of your complete flight itinerary.

Final Preparation

❑ I have completed all registration and other forms as directed.

❑ I have limited my personal items and luggage to the items listed in the **What to Bring Checklist** on page 3.

❑ I have made travel arrangements and (if applicable) attached a copy of my complete flight itinerary.

Passport Number _____ Expiration Date: _____

Signature of Participant: _____

Signature of Parent/Guardian (if under 18): _____