

## How to Register for Big Creek Missions Online:

- 1.) Search for “Big Creek Missions”
  - a.) Website: [www.bigcreekmissions.com](http://www.bigcreekmissions.com)
- 2.) In the top upper right corner you will see a blue tab that says: “Go! Summer Participant Registration”. Please click on this.
- 3.) It will take you to the summer registration hub page. Please click on the blue banner that says “Fill out your permission/release forms here”
- 4.) You will need to register for an account with the organization. Click sign up. You will need to provide:
  - a.) First and last name
  - b.) Email
  - c.) Create a password
- 5.) Once you created an account and logged in - you will click the your personal profile tab.
- 6.) You will see a spot that says “sign up for a future mission trio”. Please click “add a person” to start the registration.
- 7.) You will need to enter the trip/group code name
  - a.) **Our code name is TMT 24/25**
- 8.) Start to fill out the participant information. You will need to fill out:
  - a.) First and last name
  - b.) Age
  - c.) Birthdate
  - d.) Birth gender
  - e.) T-shirt size
  - f.) Grade in school
  - g.) Address
  - h.) Participant classification
    - i.) PLEASE SELECT: Student/participant option
  - i.) Email address
  - j.) Phone number
  - k.) Your parent’s information for an emergency contact - this includes:
    - i.) Name
    - ii.) Email
    - iii.) Phone number
  - l.) Insurance card picture BOTH FRONT AND BACK
    - i.) If you are not able to upload a picture of the insurance card please put the following information in the box:
      - (1) Insurance company name
      - (2) Group number
      - (3) Policy number
  - m.) Medical information

- i.) In the box provided please list:
    - (1) Any allergies - this includes food, medications, environmental, animals, etc.
    - (2) Any medical conditions you have
  - ii.) If you do not have any medication conditions please write "NONE" in the box
  - n.) Current medications
    - i.) In the box please write any medications you take and please include
      - (1) Name of medication
      - (2) Dosage of medication
  - o.) Estimated date of last tetanus booster
  - p.) Participants can take these medications tabs. Please select any and all medications you can take.
  - q.) Emergency contact:
    - i.) This will serve as a second emergency contact and must be filled out. Please provide:
      - (1) Name
      - (2) Phone number
  - r.) Ministry Information:
    - i.) **YOU MUST SELECT CONSTRUCTION FOR BOTH MINISTRY CHOICES**
    - ii.) P.S - i know it says you must select different ones but please select construction for both
  - s.) Ministry skills and talents
    - i.) You may fill out if you would like to
  - t.) Construction skills:
    - i.) If you have never done TMT before please leave a blank.
    - ii.) If you have participated in TMT please fill out what type of project you have worked on.
    - iii.) EVERYONE: In the box please write that you have basic knowledge of construction tools and how to use them
  - u.) Permission:
    - i.) If you are under 18: Have parent sign in the box (best you can) and type out name as signature
    - ii.) If you are over 18: You may sign the form yourself
- 9.) PLEASE SUBMIT WHEN DONE!

**PLEASE HAVE THIS FORM FILLED OUT BY THE MARCH 2ND MEETING!!!!**

If you have any questions or concerns about filling out the form please reach out to group leader Danielle at - 847-732-9821 or [dtrybus17@gmail.com](mailto:dtrybus17@gmail.com)