**Oklahoma BCM Mission Trip/Disaster Relief Report Form**

Date Submitting:

Director:

Campus:

Mission Trip  or Disaster Relief

Date(s) of Trip:

Location of Trip:       (Please include city, state, or city and country if outside of USA)

Purpose of Trip:

BCM Leader for trip:

BCM Leader phone:

BCM Leader position:

Group working with:

Local contact person:

Local contact phone:

Local contact email:

# of students participating:

# of BCM/Church leaders participating:

Insurance secured for students: yes  not yet

Insurance secured through the following:

Make sure they have liability on the insurance.

American Income Life (AIL) Insurance for students for BCM domestic trips and events including sports. Insurance website is :  [www.americanincomelife.com/bcm](http://www.americanincomelife.com/bcm)     Policy 5063s

Gallagher Charitable: International Trips: <https://www.travelwithgallagher.com/>

Phone: (800)922-8438/(803)758-1400; Fax: (803)252-1988; email [gallaghercharitable@ajg.com](mailto:gallaghercharitable@ajg.com)