

Camp Worker Registration Form

*This form **MUST** be completed, signed and returned to Concord Baptist Association
BEFORE PARTICIPATING IN CAMP.*

Legal Name: _____

Maiden Name: _____

Address: _____

City, State, Zip: _____

Phone Number: () _____ Social Security # _____

Date of Birth ____/____/____ Male _____ Female _____

Month Day Year T-shirt Size _____

Leadership Information

Are you a Christian? Yes No I am a member of _____
Baptist Church.

Are you committed to a vocational career in Christian service? Yes No
What service?

Do you hold any Medical Certification to offer first aid? Yes No
What?

Do you hold any Water Safety Certification? Yes No
What?

Do you have training in teaching, athletics, college degrees (majors), trade school
certificate, or other talent relevant to camp activities? Yes No What?

Do you have musical talent/skills? Yes No What?

CRIMINAL AND MORAL INFORMATION

It is our responsibility to protect children at camp from any form of abuse and our workers from unwarranted charges; therefore we must ask that you respond to the following questions.

- 1. Have you ever been convicted of a sex-related crime?
 Yes No
- 2. Have you ever been convicted of a crime involving violence or the threat of violence?
 Yes No
- 3. Have you ever been convicted of any other crime except a minor traffic violation?
 Yes No
- 4. Have you been arrested for a crime for which there has not been an acquittal or dismissal?
 Yes No
- 5. Do you use alcohol or illicit drugs?
 Yes No

Should you answer yes to any of these questions, explain why you should now be allowed to work with children in camp.

Where have you lived for the past ten years? Give complete listing!

Please read the following before signing your name.

I affirm that I have answered the above questions truthfully.

I realize that if I am to work at the Camps of Concord Baptist Association that I will be **expected to comply** with Camp rules, attend all Camp Counselor/Staff Meetings, and study those materials given me concerning my area of work and responsibilities, Camp rules and aims. I agree to hold harmless Concord Baptist Association, Camp P82, their leaders, employees and volunteers for any damages, losses, diseases or injuries incurred.

(Signed) _____

Date _____

I grant permission for the Concord Baptist Association to run a **background check** on me through First Advantage/Shepherd's Watch.

(Signed) _____

Date _____

For Pastor or Church Official to Complete

This person has been an active member of our church for _____ years. I have interviewed this person and to the best of my knowledge, the facts listed in this application are true and I am recommending this person to work with children at camp.

(Signed) _____

Date _____

Church Position _____

Mail completed form to: Concord Baptist Association
804 Fairmount Blvd.
Jefferson City MO 65101

NO LATER THAN JULY 10, 2019