

Camp Worker in Training (minors who have finished Gr. 9 or above)
Registration Form

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

Legal Name: _____

Address: _____

City, State, Zip: _____

Phone Number: () _____ Social Security # _____

Male _____ Female _____ Age: ____ Year in School: ____ T-Shirt Size _____

Parent/Guardian: _____ Relationship: _____

Are you a Christian? Yes ___ No ___

Name of church you most regularly attend: _____ How often? _____

Pastor's name: _____

Have you held any leadership positions in the church? Yes ___ No ___ If yes, please describe:

Why do you want to be a junior staff member?

What do you think are a few of the most important characteristics of a junior staff member?

ADDITIONAL INFORMATION

1. Have you accepted Jesus Christ as your Lord and Savior? Yes No
2. Have you been baptized? Yes No
3. Circle one: Would you describe your relationship with Jesus as:
 Stuck, Bored, OK, Growing, Making a difference, Pretty good, Just like Jesus
4. Please explain how you became a Christian

More questions on next page.

ADDITIONAL INFORMATION (Continued)

5. Do you regularly attend your church and youth activities? Yes No

6. What are some of your spiritual gifts (if you know them)?

7. Serving Christ at camp will require living outside of our cultural norms. Will you be able to lay aside expectations regarding personal conveniences, food, sleeping accommodations, dress, etc.?
Yes No

8. Are you willing to submit to the leadership and discipleship process of the Camp Leaders?
Yes No

I grant Concord Baptist Association permission to use photographs, videos and other types of digital and photographic recordings of the minor listed on this form to be used for camp promotion to our churches, postings on social media and web sites. Every reasonable effort t will be made to maintain privacy of all individuals. Yes / No Signed by Parent or Guardian _____

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 _____

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 _____

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

NO LATER THAN JULY 10, 2019