

** Counselor forms are due to Pastor Ryan on or before June 3rd*

Jr. High Camp

"It is the Lord who goes before you. He will be with you; he will not fail you or forsake you. Do not fear or be dismayed"
Deuteronomy 31:8 (NRSV)

#JHC18

Camp Counselor Info:

1. You must be 18 or older
2. You must have a pastor's recommendation form
3. Must be returned no later than June 5th



July 5-9, 2018

CIT Info:

1. Must be entering 11th - 12th grade / or recent graduate
2. You must have a pastor's recommendation form
3. You will be notified if selected.

[Mail completed form to: Camp Registrar Rev. Sarah Fox 10450 S. Co Rd 544E, Selma, IN 47383]

PERSONAL INFORMATION:

I am applying to be a: Counselor _____ CIT _____ Sex: M F Date of Birth: _____

Name: _____ Address: _____

City/State/Zip: _____ Phone: _____

Home Church: _____ T-Shirt Size: S M L XL XXL

SS#: _____ Email: _____

Driver's License Number: _____

HEALTH HISTORY:

Any pre-existing or present medical conditions _____

Name and dosage of any medications that must be taken: _____

List all allergies: _____

List all Medical allergies: _____

Due to the complex problems we each face in today's world, we need a signed statement from you in answer to the following questions. Insurance companies request that church groups, as well as other groups, follow this procedure to eliminate charges against our camp or church-related programs. You must be Naz Safe certified and have a background check on file.

Have you ever been accused of or arrested for any act of sexual impropriety, molestation, deviate conduct, harassment, or abuse? ___ Yes ___ No

I certify that the answer set forth above is complete, true, and honest, to the best of my knowledge.

I hereby grant my permission for the investigation of the statement set forth herein, in a reasonable manner, to determine my qualifications for service. I recognize that under no circumstances is this a contract for employment.

I further recognize that any false or misleading statements made here, or made verbally to my superior, if any, may be grounds for discharge. I understand and agree to abide by all rules, regulations, and directions of my superior.

Signed: _____ Date: _____

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