

SOUTH TEXAS YOUTH CAMP 2017

WEEKLY LEADER / ADULT VOLUNTEER APPLICATION

FORMS MUST BE SUBMITTED BY **May 10, 2017**.

Please complete this form and give it to your Pastor to sign and mail to the address below.

ALL YOUTH PASTORS ATTENDING CAMP MUST COMPLETE THIS FORM. Applications must be approved.

Please include ALL of the following: Weekly Counselor Application & Copy of Driver's License

Forms **CANNOT** be processed without a copy of your Driver's License

PLEASE CIRCLE CAMP ATTENDING

*****MUST BE 21 YEARS or Older*****

Youth Camp #1:
June 5 - 8
Speaker: Zach Hinson

Youth Camp #2:
June 13 -16
Speaker: Truston Baba

Youth Camp #3:
June 20 - 24
Speaker: Mike Miller

PERSONAL INFORMATION

Legal First Name: _____ Legal Middle Name: _____ Legal Last Name: _____

Nickname/Preferred Name: _____

Birth Gender (circle one): Male Female Date of Birth: _____/_____/_____ Age: _____

Address: _____ City: _____ St: _____ Zip: _____

Email Address: (NEW: Background Check Verification will be emailed. Please write legibly) _____

Cell:(_____) _____ Other:(_____) _____

Driver's License #: _____ Social Security #: _____

PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE. FORMS WILL NOT BE PROCESSED WITHOUT A COPY OF YOUR DRIVER'S LICENSE (and the above information completely filled out)

Are you a Christian? (if the answer is no, there is no need to continue) **Yes** **No**

Church attending with: _____ City: _____ Church #: (_____) _____

Pastor's Name: _____ Youth Pastor's Name: _____

Do you have any physical handicaps or conditions preventing you from performing certain types of activities:

INSURANCE INFORMATION

Do you have insurance (if so please complete the following information): **Yes** **No**

Insurance Company: _____

Address: _____ City: _____ St: _____ Zip: _____

Policy Number: _____

I agree to abide by the camp policies. I understand that I will be held responsible for any medical expenses that may occur. I am willing to have a criminal background check done by a law enforcement agency. I agree to abide by the Policy Statement & Guidelines as set forth. I understand that, with the exception of law enforcement officers, no person shall carry or possess a weapon of any kind on Hill Country Campground or its facilities while attending a Hill Country Camp Youth or Children's event. As a participant in this event, I authorize the South Texas District Council of the Assemblies of God to use my likeness in photographs or video in any and all of its publications and in any and all other media. I will make no monetary or other claim against the District for the use of such photographs or video. Finally, I agree to view the staff/counselor training materials prior to camp.

Signature/Date

*****THIS AREA TO BE COMPLETED BY YOUR SENIOR PASTOR OR YOUTH PASTOR*****

Pastor, please complete this portion and then return the application to:
South Texas Youth Ministries, 11102 East Freeway, Houston, TX 77029

The above person named is known to me as _____
Has a criminal background check been done by you? **Yes** **No**
Is there any reason why this person should NOT serve as staff at Youth Camp? (if so, explain): _____

Rate the Applicant:

Spiritual Maturity	Excellent	Good	Fair	Poor
Spirit of Cooperation	Excellent	Good	Fair	Poor
Dependability	Excellent	Good	Fair	Poor

Pastor's Signature/Date

