

COUNSELOR ASSIGNMENT

Please indicate which camp/camps you would like to volunteer as counselor.

COUNSELOR TRAINING SESSION JUNE 25, 2018/JULY 30, 2018

JUNE 25-29, 2018 (Junior 1) ☐ JULY 30-AUGUST 4, 2018 (Junior 2) ☐ JULY 30-AUGUST 4, 2018 (Teen 1)	·
PERSONAL INFORMATION (Counse	elor must be 16 or older)
	MARITAL STATUS: ☐ Single ☐ Married ☐ LARGE ☐ X-LARGE ☐ 2XL ☐ 3XL ☐ OTHER
PHONE:()	EMAIL:
PERSONAL TESTIMONY	
	estimony of salvation and how you will by God's grace benefit the
campers this summer by your consistent Chr	
CHURCH MEMBERSHIP	
ADDRESS OF CHURCH REGULARLY A	TTENDED: CHURCH PHONE:()
MEMBERSHIP SINCE:	DO YOU REGULARY ATTEND ALL SERVICES?:
PASTOR'S RECOMMENDATION	
	a member of our Church in good standing. I am personally
· · · · · · · · · · · · · · · · · · ·	the extent that I can recommend him / her to work as a
•	elieve he / she to be qualified to serve young people in this
	will be assigned as a counselor primarily to the youth of our
• • • • • • • • • • • • • • • • • • • •	have additional campers assigned to his/her care at a ratio
of 1 counselor per 10 campers.	
PASTOR'S SIGNATURE	DATE