

2022 STAFF APPLICATION

Mail Application To:

Youth Camp 2022
6317 Old US 23
Fenton, MI 48430



PLEASE PRINT:

Name _____ Gender at Birth _____ Age _____ Date of Birth _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____ E-mail Address _____

Social Security Number (must be disclosed for background check) _____

Emergency Contact _____ Phone _____

Did you work camp last year? ____ Yes ____ No

Do you meet the General Requirements described below? ____ Yes ____ No

GENERAL REQUIREMENTS FOR YOUTH CAMP WORKERS:

- Must be at least 16 years of age (18 for Cabin Leaders)
- Must attend the required Staff Orientation Meeting at 11:00am on the first day of camp
- Must be a christian
- Must be a regular attendee of a local church
- Must have the endorsement signature of the local pastor (pastor may be contacted)
- If enrolled in high school, applicant must attend Senior Camp as a camper to be eligible to work other camps

CAMPS YOU WISH TO WORK: (check all that apply)

____ Senior Camp: June 20-24 ____ Middle School Camp: June 27-July 1 ____ Kids Camp July 4-July 8

AREA OF INTEREST: (Indicate your primary preference as 1, 2, 3, etc)

____ Cabin Leader ____ Cafeteria ____ Nurse (certified) ____ Lifeguard (must be certified)
____ Asst. Cabin Leader ____ Recreation ____ Canteen ____ Wherever Needed

PERSONAL INFORMATION

Have you ever been arrested, convicted or plead guilty to a crime?

____ Yes ____ No (*if yes, please explain, attach a separate page if necessary)

Have you ever been investigated by any federal, state, or local agency for neglect or child abuse?

____ Yes ____ No

I understand and agree that no tobacco, alcohol, illegal drugs or substances, vapes, firearms, or weapons are tolerated on the campground. All of my medications (prescription AND non-prescription) will be kept at the nurse's station to ensure safety of the campers. ____ yes ____ No

Do you have a current driver's license? ____ Yes (copy of Drivers License must be included with this application)

Identity must be confirmed with state drivers license or photo I.D. ____ No (a picture ID must be included with this application)

FOOD ALLERGY ALERT

Do you have any food allergies we should be aware of? ____ yes ____ No

If yes, please explain: _____

*you are responsible for any allergy exposure, although the camp kitchen staff will attempt to inform you of obvious issues

CHURCH HISTORY AND PRIOR YOUTH WORK

Name of the church where you are a member or regularly attend _____

Name of Senior Pastor (signature must appear at the bottom of this form) _____

List any gifts, training, education, or other factors, which have prepared you for work in youth camp

TWO PERSONAL REFERENCES (not former employers/relatives)

Name _____

Email or Address _____ Phone _____

Name _____

Email or Address _____ Phone _____

MEDICAL INSURANCE INFORMATION *Note: camp insurance policy coverage is secondary to your primary insurance coverage*

Insurance Company _____ Policy ID / Group Number _____

Name of Policy Holder _____ Relationship _____

Pre-Authorization required? _____ If yes, what limits? _____

Doctor's Name/Phone Number _____

**Attach copy (front & back) of insurance card to this application*

REQUIRED: If you are under the age of 18, your parents MUST complete and sign this medical release statement below:

In the event my child _____ needs emergency medical attention; I give my consent for camp officials to seek medical assistance. I understand that the camp will make every attempt to notify me of such action as is possible.

PRINT Parent/Guardian Name _____ **PHONE** _____

SIGNATURE Parent/Guardian _____ **DATE** _____

RELEASE FOR CRIMINAL RECORDS CHECK (Required)

I hereby consent for the Michigan Church of God office to seek from local law enforcement any information which pertains to any record of conviction contained in its files or in any criminal file maintained on me whether local, state, or national. I hereby release the Police Department from any and all liability resulting from such disclosure.

Signature _____ Date _____

APPLICANT'S STATEMENT

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for youth camp work. In consideration of the receipt and evaluation of this application by the Church of God, I hereby release to any individual, church, youth organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at this time result to me, my heirs or family, on account of compliance or any attempt to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application. Should my application be accepted, I agree to be bound by laws and policies of the Church of God and to refrain from any unscriptural conduct in the performance of my services on behalf of the church. I also agree to participate in training, enhancement programs, and the Staff Orientation meeting provided by the State Director's office in preparation of my participation this summer. **(This meeting will be on the first day of camp at 11:00 AM and is MANDATORY for all workers!)**

I further state that I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT. This is a legally binding agreement, which I have read and understand.

Applicant's Signature

Date

Pastor Endorsement Signature (Required)

Date